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SECRETARY OF STALL BIVISION OF CORPORATIONS

JUL 2 5 2013
T. I !AMPTON

COVER LETTER

TO: Registration Section **Division of Corporations** SHANABC, L.L.C.

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Shana Buswell-Charkow	
Name of Person	
Firm/Company	
5220 Coquina Key Dr. Southeast, Unit C	
Address	
Saint Petersburg, FL 33705	
City/State and Zip Code	
misswonk1@gmail.com	
E-mail address: (to be used for future annual report notification)	

For further information concerning this matter, please call:

Christy Vicari

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

□\$125.00 Filing Fee

□\$130.00 Filing Fee & Certificate of Status

■\$155.00 Filing Fee & Certified Copy

(additional copy is enclosed)

□ \$160.00 Filing Fee, Certificate of Status & Certified Copy

(additional copy is enclosed)

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier_Address

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

Effective Date 7/20/13

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Compa	ony io			
The name of the Emmed Liability Compa	arry is:			
SHANABC, L.L.C				
(Must end with the words "Limit	ed Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:			
5220 Coquina Key Dr. Southeast,	5220 Coquina Key Dr. Southeast,			
Unit C	Unit C			
Saint Petersburg, FL 33705	Saint Petersburg, FL 33705			
The name and the Florida street address of Shana Buswell-Charkow	The registered agent are.			
	Name			
5220 Coquina Key Dr. Sou	utheast, Unit C			
Florida st	treet address (P.O. Box NOT acceptable)			
Saint Petersbur	g, FL 33705			
	City, State, and Zip			
Having been named as registered agent a liability company at the place designate registered agent and agree to act in this all statutes relating to the proper and countries and accept the obligations of my position. Registered Agent'	ted in this certificate, I hereby accept to capacity. I further agree to comply w omplete performance of my duties, and	the appointment as with the provisions of Al am familiar with		
(CO	NTINUED)	SECRETON O		

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JUL 24 AM 10: 09

SECRETARY OF STALE

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGRM	Shana Buswell-Charkow	
	5220 Coquina Key Dr. Southeast, Unit C	
	Saint Petersburg, FL 33705	
		
Use attachment if necessary)		
F.V. Effective date if other than the	he date of filing: 7/20/2013 . (OPTIO	

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Shana Buswell-Charkow

Typed or printed name of signee

Filing Fees:

REQUIRED SIGNATURE:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)