

L13000125293

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

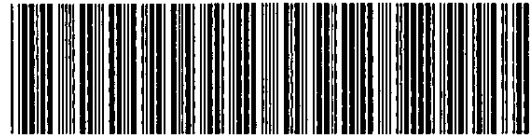
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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2013 SEP -4 PM 1:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SEP - 5 2013

J. BRYAN

August 27, 2013

3047 Ibis Court,
Clearwater, FL 33762.

Dear Sir/Madam, this cover letter provides contact information for MDRY, LLC . As manager, I can be reached by cell at 813-361-9335, and at the address listed above.

Sincerely,



Anserd Fraser

FILED
2013 SEP -4 PM 1:02
SEVENTH JUDICIAL CIRCUIT
TALLAHASSEE, FLORIDA

(850) 245-6051.

COVER LETTER

**TO: Registration Section
Division of Corporations**

MRDY, LLC

SUBJECT: _____
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:

ANSERD FRASER

Name of Person

MRDY, LLC

Firm/Company

2655 ULMERTON RD., SUITE #177

Address

CLEARWATER, FL 33762

City/State and Zip Code

aglfraser@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANSERD FRASER

813 361-9335

Name of Person

at (_____) _____

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

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2013 SEP -4 PM 1:02
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED
2013 SEP -4 PM 1:02
TALLAHASSEE
FLORIDA
SECRETARY OF STATE

ARTICLE I - Name:

The name of the Limited Liability Company is:

MRDY, LLC

(Must end with the words "Limited 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:

2655 ULMERTON RD., SUITE 177
CLEARWATER, FL 33762

Mailing Address:

2655 ULMERTON RD., SUITE 17
CLEARWATER, FL 33762

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

ANSERD FRASER

Name

3047 IBIS COURT,

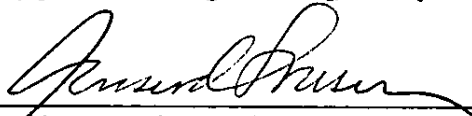
Florida street address (P.O. Box **NOT** acceptable)

CLEARWATER, FL 33762

FL

City, State, and Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MANAGER

ANSERD FRASER
3047 IBIS COURT,
CLEARWATER, FL 33762

MANAGING MEN

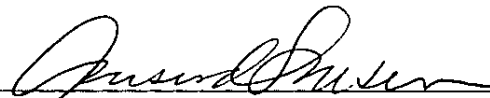
YVONNE FRASER
3047 IBIS COURT,
CLEAWATER, FL 33762

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



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.)

ANSERD FRASER

Typed or printed name of signee

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)