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J. SAULSBERRY EXAMINER SEP 19 2013

COVER LETTER

TO: **Registration Section Division of Corporations** Felspar Starfish LLC 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: .awrence R Schram Name of Person Felspar Starfish LLC Firm/Company 10074 E Bay Harbor Dr Unit 74B Address Bay Harbor Islands, FL 33154 City/State and Zip Code LarrySchram@hotmail.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: arry Schram. Name of Person Area Code & Daytime Telephone Number Enclosed is a check for the following amount: □\$130.00 Filing Fee & **□\$155.00** Filing Fee & □ \$160.00 Filing Fee, **■\$125.00** Filing Fee Certificate of Status Certified Copy Certificate of Status & (additional copy is enclosed) 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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ADTICLE L. Nomes		
ARTICLE I - Name: The name of the Limited Liability Company	y is:	
Felspar Starfish 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	ne principal office of the Limited	Liability Company is:
Principal Office Address:	Mailing Address:	
10074 E Bay Harbor Dr Unit 74B	10074 E Bay Harbor Dr Unit 74B	
Bay Harbor Islands, FL 33154	Bay Harbor Islands, FL 33154	
		
business entity with an active Florida registration.) The name and the Florida street address of t Lawrence R Schram N	the registered agent are:	
10074 E Bay Harbor Dr Unit 7 Florida stree	et address (P.O. Box <u>NOT</u> acceptable)	
Bay Harbor Islands, f	FI 33154	
	y, State, and Zip	
Having been named as registered agent and liability company at the place designated registered agent and agree to act in this call statutes relating to the proper and com and accept the obligations of my position of face	l in this certificate, I hereby accept apacity. I further agree to comply aplete performance of my duties, a	t the appointment as with the provisions of nd I am familiar with
Registered Agent's S	ignature (REQUIRED)	
-		2
(CON	TINUED)	

Page 1 of 2

Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR Lawrence R Schram-10074 E Bay Harbor Dr Unit 74B Bay Harbor Islands, FL 33154 IRA Services Trust Co FBO Lawrence R Schram IRA Member IRA Number 262614 1160 Industrial Road Suite 1, San Carlos CA 94070 Lawrence R Schram Account Holder, 10074 E Bay Harbor Dr Unit 74B Bay Harbor Islands, FL 33154 0 to 18 to (Use attachment if necessary) ARTICLE V: aEffective date, lift 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.) . Wi. 1 **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.) Michael McMair Trust Officer
Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation

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

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



ORGANIZATIONAL RESOLUTION

This resolution remains in effect until you receive notice that it has been revoked or receive a new form.

- l. Organization Information
 - a. Name of Organization: IRA Services Trust Company

 - b. Organization Type: Trust Company serving as Custodian
 c. Corporate Headquarters: 401 E 8th St, Suite 200L, Sioux Falls, SD 57103
 d. Administrative Address: 1160 Industrial Rd, Suite 1, San Carlos, CA 94070
 - Tax Identification Number: 26-2627205
 - Telephone Number: 650-593-2221
 - g. Fax Number: 650-591-2168
- Ш. This resolution is an authorization to act on behalf of IRA Services Trust Company's accounts.
- Ш. Authorized Signatories:

The individuals who sign below are authorized to:

- a. Sign any documents related to assets held by IRA Services Trust Company's accounts.
- b. invest and redeem the assets held by IRA Services Trust Company's accounts.
- c. Obtain account information and give instructions for the purchase, sale, exchange, transfer of assets or securities held by IRA Services Trust Company's accounts.
- d. Establish access to IRA Services Trust Company's accounts online or through any other electronic or telephonic system.
- e. Engage in any other action regarding the assets held by IRA Services Trust-Company's accounts ____

The number of signatures required on a document is one (1). Name of authorized signatories: Dated: 08/20/2019 Michael F McNair, Trust Officer Dated: 08/20/2013 Gary R Shumm, Vice President Edwin Blue, President Dated: 08/20/2013

Additional Persons who can conduct transactions:

The individuals listed below are not allowed to sign any documents related to IRA Services Trust Company's accounts, however, they will be allowed to:

- a. Invest the assets held by IRA Services Trust Company's accounts.
- Obtain account information and access IRA Services Trust Company's accounts online or through any other electronic or telephonic system.

Name of Additional Authorized Persons:

Mary Marr, Compliance & Audit Gail Bloxsom, Administrative Assistant Gloria Avenida, Liquidations Martha Gray, Investments & Withdrawals Thomas Gastanaga, Transfers Star Ferdin, Deposit Processing

Certification and Indemnification

IV.

The undersigned signatories of IRA Services Trust Company hereby certify that:

- Each of the authorized signatories listed below is authorized by resolution of the board of directors to
 act on behalf of the organization in connection with any of the IRA Services Trust Company accounts.
- IRA Services Trust Company agrees to indemnify and hold harmless any investment company, its
 officers, employees and agents from and against all losses, claims and expenses (including
 attorney's fees) incurred by the investment company for relying in good faith upon the information
 provided in this resolution and for acting on instructions believed by the investment company to have
 originated from any authorized signatory or additional authorized person listed above.
- This resolution remains in full force and effect until revoked by an authorized signatory of IRA Services Trust Company. Any revocation will not affect any liability resulting from transactions initiated before the investment company has had a reasonable amount of time to act upon the revocation.

The undersigned are authorized to certify this information on behalf of IRA Services Trust Company and confirm that these provisions conform to the charter or other organizing document of IRA Services Trust Company.

Company.		
Authorized Signatories:	A	
Edwin Blue, President	- GHWL	Dated: 08/20/2013
Gary R Shumm, Secretary	- Harrist	Dated: 08/20/2013
	Ser. D.	
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