# L13000163340

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
. (Cit	ry/State/Zip/Phone	e #)		
PICK-UP	WAIT	MAIL		
(Bu	siness Entity Nar	me)		
(Document Number)				
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





800252730488

10/23/13--01024 -021 \*\*130.00

TILED

13 NOV 21 AM II: 12

SECRETARY OF STATE

NOV 2 1 2013 T. BROWN (850) 245-6051.

# **COVER LETTER**

Division of Co	orporations		
Syntrop	-		
SUBJECT:		ted Liability Company	
The enclosed Articles of	of Organization and fee(s) are	submitted for filing.	
_	oondence concerning this mat	ter to the following:	
Alexander k	Kunis		
		Name of Person	<del></del>
Syntropy LL	.C		
		Firm/Company	
1623 Canop	oy <sup>*</sup> Oaks Blvd		
		Address	
Palm Harbo	r, FL. 34683		
akmusic07@		ty/State and Zip Code	
	E-mail address: (to be used	for future annual report notification)	
For further information	concerning this matter, please	e call:	
Alexander Kunis		727 599-4594	
Name	of Person	at () Area Code & Daytime Teleph	one Number
Enclosed is a check for	or the following amount:		
□\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certified Copy	\$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 Cir Tallahassee, FL 32301	cle



October 29, 2013

ALEXANDER KUNIS SYNTROPY LLC 1623 CANOPY OAKS BLVD PALM HARBOR, FL 34683

SUBJECT: SYNTROPY LLC. Ref. Number: W13000060106

We have received your document for SYNTROPY LLC. and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on . Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Teresa Brown Regulatory Specialist II

Letter Number: 613A00025201

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Compar	ry is:
	THE WAY
Syntropy LLC.	7,750
(Must end with the words "Limited	Liability Company, "L.L.C.," or "LLC.")  The principal office of the Limited Liability Company
ARTICLE II - Address:	£ 5 1
The mailing address and street address of t	he principal office of the Limited Liability Continuous
Principal Office Address:	Mailing Address:
1623 Canopy Oaks Blvd	1623 Canopy Oaks Blvd.
Palm Harbor, Fl. 34683	1623 Canopy Oaks Blvd.  Palm Harbor, FL. 34683  tered Office, & Registered Agent's Signature:
Palm Harbor, Fl. 34683  ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	Palm Harbor, FL. 34683  tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	Palm Harbor, FL. 34683  tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)	Palm Harbor, FL. 34683  tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of Alexander Kunis	Palm Harbor, FL. 34683  tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of Alexander Kunis	Palm Harbor, FL. 34683  tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another  the registered agent are:
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of Alexander Kunis  1623 Canopy Oaks Florida street	Palm Harbor, FL. 34683  tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another  The registered agent are:  Name  Blvd eet address (P.O. Box NOT acceptable)
ARTICLE III - Registered Agent, Regis (The Limited Liability Company cannot serve as its own business entity with an active Florida registration.)  The name and the Florida street address of Alexander Kunis  1623 Canopy Oaks	Palm Harbor, FL. 34683  tered Office, & Registered Agent's Signature: Registered Agent. You must designate an individual or another  The registered agent are:  Name  Blvd eet address (P.O. Box NOT acceptable)

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)

Page 1 of 2



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

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGRM	Alexander Kunis 1623 Canopy Oaks Blvd Palm Harbor FL. 34683
<del></del>	
(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.)

Alexander Kunis

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 50.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)