## 1500051549

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer





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2015 HAR -9 AMIN: 47

MAR 24 2015 D. BRUCE

## **COVER LETTER**

TO:	Registration Division of	n Section Corporations			
SUBJE	ЕСТ:		nterprises, LLC Limited Liability Company		
The end	closed Articles	s of Organization and fee(s	s) are submitted for filing.		
Please	return all corre	espondence concerning thi	is matter to the following:		
			Stephen M Merz Name of Person		
			Firm/Company		
			2550 SW 29th Terrace		
	Address			2015 K	R·st
		C	ape Coral, Florida 33914	75 0	1293
			City/State and Zip Code	9	į.
		St mail address: (to be	tevemerz7@gmail.com used for future annual report notification)	TTo TTo	ğ 27.
For furt	ther information	on concerning this matter,	10 10 10 10 10 10 10 10 10 10 10 10 10 1	AM II: 1,7	17A
	Steve Me		at ( <u>239</u> ) <u>770-1973</u>		
	Nar	ne of Person	Area Code Daytime Telephone Number		
Enclose	ed is a check fo	or the following amount:			
\$125.0	0 Filing Fee	☑\$130.00 Filing Fee & Certificate of Status		d)	
	Reg Div	iling Address gistration Section ision of Corporations Box 6327	Street/Courier Address Registration Section Division of Corporations Clifton Building		

2661 Executive Center Circle Tallahassee, FL 32301

Tallahassee, FL 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Merz Ente	rprises, LLC				
	(Must end with the words "Li		mpany, "L.L.C.," or "I	LC.")		
ARTICLE II - Add The mailing address	ress: and street address of the princ	ipal office of the L	imited Liability Comp	any is:		
Principal Office Ad	dress:	Mailing	Address:			
2550 SW 29th Ter	race	2550 SV	V 29th Terrace			
Cape Coral, Florid	a 33914	Cape Co	oral, Florida 33914			
(The Limited Liabili another business ent	2550 SW 29 Florida street address (P.C	s own Registered A stered agent are:  M Merz  Name  Oth Terrace	Agent. You must design	nate an individual series of STATIONES	al or 2015 HAR -9 AM 11: 4	Section 1
	Cape Coral City	FL	33914 Zip	<u> </u>	~	
the place designa capacity. I further	as registered agent and to accounted in this certificate, I hereby agree to comply with the provi I am familiar with and accept t	accept the appoint sions of all statutes he obligations of n Chapter 605, F.S	ment as registered agen relating to the proper ny position as registered	it and agree to and complete p	act in t erform	this iance

(CONTINUED)
Page 1 of 2

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
"MGR"	Deborah Merz
	2550 SW 29th Terrace Cape Coral, Florida
	Cape Coral, Florida
"AMBR"	Trenton Merz
	2550 SW 29th Terrace
	Cape Coral, Florida
E V: Effective date, it other than the date of	of filing: March 7, 2015 (OPTIONAL)
	of filing: March 7, 2015 (OPTIONAL) ecific and cannot be more than five business days prior to or 90
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ective date is listed, the date must be spend filling.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:	ecific and cannot be more than five business days prior to or 90
REQUIRED SIGNATURE:  Signature of a mer  (In accordance with section 605 constitutes an affirmation under I am aware that any false inform	ecific and cannot be more than five business days prior to or 90

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)