1 5000072002

(Requestor's Na	me)
(Address)	
(Address)	
(City/State/Zip/P	hone #)
PICK-UP WAR	MAIL
(Business Entity	Name)
(Document Nun	nber)
Certified Copies Certifi	cates of Status
Special Instructions to Filing Officer	:

Office Use Only

APR 2 4 2015

T. SCOTT



300271082053

04/01/15--01020--002 **130.00

15 APR - | 6H 9: 0

7venth Sun Brewery Tampa LLC

6809 N Nebraska

Tampa, FL 33604

To Whom It May Concern,

Please find the attached Articles of Incorporation for 7venth Sun Brewery Tampa LLC. In the event you need to contact me I can be reached at 770-235-5094. My mailing address is 412 Beltrees St., Dunedin, FL 34698.

Thank you very much.

Sincerely,

Devon Kreps

President and Managing Member

7venth Sun Brewery Tampa LLC

770-235-5094

COVER LETTER

TO:

Registration Section

Division of Corporations		
OUDIDOT TO U.O. D. T. LLO		
SUBJECT: <u>7yenth Sun Brewery Tampa LLC</u> Name of Lin	nited Liability Company	
The enclosed Articles of Organization and fee(s) ar	e submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Devon Kreps	Name of Person	
7venth Sun Brewery Tampa LLC	Firm/Company	
412 Beltrees St.	Address	
- "		
Dunedin, FL 34698	City/State and Zip Code	
devon.xbco@gmail.com F-mail address: 110 he use	d for future annual report notifica	tion)
For further information concerning this matter, plea		
. 0. 7	•	
Devon Kreps at (770) 235-5094 Area Code Daytime Tel	ephone Number
Enclosed is a check for the following amount:	_	
□ \$125.00 Filing Fee	□\$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	Street/Courier Addi	res <u>s</u>
Registration Section Division of Corporations	Registration Section Division of Corporat	ions
P.O. Box 6327 Tallahassee, FL 32314	Clifton Building 2661 Executive Cent	
	Tallahassee, FL 3230)1

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

7venth Sun Brewery Tampa LLC (Must end with the w	ords "Limited Liability Company, "L.L.C.," or "LLC.")
·	
ARTICLE II - Address: The mailing address and street address of t	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
412 Beltrees St.	6809 North Nebraska
Dunedin, FL 34698	Tampa, FL 33604
another business entity with an active Flor	erve as its own Registered Agent. You must designate an individual or rida registration.)
,	rida registration.)
The name and the Florida street address of	rida registration.) The registered agent are: Name
The name and the Florida street address of	the registered agent are: Name
The name and the Florida street address of Devon Kreps 412 Beltrees Str Florida street add Dunedin	Name eet ress (P.O. Box NOT acceptable) FL 34698
The name and the Florida street address of Devon Kreps 412 Beltrees Str Florida street add Dunedin	Name eet ress (P.O. Box NOT acceptable)

(CONTINUED)

Page 1 of 2

itle:	Name and Address:
AMBR" = Authorized Member	
MGR" = Manager	D 1/
MGR	Devon Kreps
	412 Beltrees Street
	Dunedin, Ft. 34698
	
	<u> </u>
	
V: Effective date, if other than the date five date is listed, the date must be sp	of filing: 331 2015 (OPTIONAL)
V: Effective date, if other than the date tive date is listed, the date must be sp filing.)	of filing: 3312015 (OPTIONAL) ecific and cannot be more than five business days prior to or
E V: Effective date, if other than the date ective date is listed, the date must be sp f filing.) E VI: Other provisions, if any.	of filing: 331 2015 (OPTIONAL) ecific and cannot be more than five business days prior to or
EV: Effective date, if other than the date crive date is listed, the date must be sp f filing.) EVI: Other provisions, if any.	of filing: 331 2015 (OPTIONAL) ecific and cannot be more than five business days prior to or
E V: Effective date, if other than the date crive date is listed, the date must be sp f filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE:	ecific and cannot be more than five business days prior to or
E VI: Other provisions, if any. E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section of constitutes an affirmation under 1 am aware that any false infor	ember or an authorized representative of a member. 3.31 2015 (OPTIONAL) ember or an authorized representative of a member. 3.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true. mation submitted in a document to the Department of State my as provided for in s.817.155, F.S.)
E V: Effective date, if other than the date ective date is listed, the date must be spot filing.) E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section of constitutes an affirmation under 1 am aware that any false infor	ember or an authorized representative of a member. 35.0203 (1) (b), Florida Statutes, the execution of this document er the penalties of perjury that the facts stated herein are true mation submitted in a document to the Department of State

Page 2 of 2