L15000083079

(Requestor's Name)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Boodinone Hambor)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
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03/03/15--01007--007 **50.00

05/13/15--01001--005 **75.00

SECREMENT OF STATE

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COVER LETTER

TO: Registration Section Division of Corporations			
SUBJECT: Acc Enter Name of Lim	MSES Crow Lle ited Liability Company		
The enclosed Articles of Organization and fee(s) are	e submitted for filing.		
Please return all correspondence concerning this ma	atter to the following:		
Roymond A	Name of Person		
Ace Enlergy	Firm/Company Growth		
3690 Bali L	Address		
2sters PL 33	918		
Daramas 1789ra	ity/State and Zip Code Walker Company I fortfuture annual report notification)	15 HAY	
For further information concerning this matter, please	se call:	12	
Raymand Alce at (2)	Area Code Daytime Telephone Number	를 보고 있다. 	
Enclosed is a check for the following amount:			
□ \$125.00 Filing Fee □\$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclose	d)	
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



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 25, 2015

RAYMOND ALCE 3690 BALI LANE ESTERO, FL 33928

SUBJECT: ALCE ENTERPRISES GROUP LLC

Ref. Number: W15000021044

We have received your document for ALCE ENTERPRISES GROUP LLC and your check(s) totaling \$50.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

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.

Shelia H Young Regulatory Specialist II

Letter Number: 615A00005999

www.sunbiz.org

DO DOV COOF Well-berne Dienide 909



April 22, 2015

RAYMOND ALCE 3690 BALI LANE ESTERO, FL 33928

SUBJECT: ALCE ENTERPRISES GROUP LLC

Ref. Number: W15000021044

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

Please accept our apology for failing to mention this in our previous letter.

There is a fee of \$75.00 due.

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.

Letter Number: 815A00008175

Shelia H Young Regulatory Specialist II

www.sunbiz.org

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:		
Must end with the words "Limi	ited Liability Company, "L.L.C.," or "LLC.")	<u>, </u>
ARTICLE II - Address: The mailing address and street address of the principal	al office of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
3690 balt / 1 Colero X 33929	3690 bali Ly 1370 K 33978	
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its or another business entity with an active Florida registra	wn Registered Agent. You must designate an in-	dividual or
The name and the Florida street address of the register National Street address (P.O. E. City)	HCe ame M	
Having been named as registered agent and to accept the place designated in this certificate, I hereby acc capacity. I further agree to comply with the provisio of my duties, and I am familiar with and accept the Ch	cept the appointment as registered agent and agr ons of all statutes relating to the proper and comp	ree to act in this plete performanc
Register d Agent's Sig	gnature (REQUIRED)	SECRET SECRET
(CONTIN		SEE FLOR

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager 🔿	On the of Alice
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,	3690 bale LA
	25tero DC 93929
400	
MOR	Trailia Mae
•	23560 Walden center or the
	BUNDA SPVINGS PL DUISY
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(Use attachment if necessary)	
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