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(Re	questor's Name)	
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PICK-UP	WAIT	MAIL
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Certified Copies	Certificates	of Status
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Special Instructions to	Filing Officer:	
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Office Use Only

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THREE CORDS LLC 6843 MAIN STREET, SUIT 302 MIAMI LAKES, FL. 33014 PHONE: 305-216-2629

June 23, 2015

REGISTRATION SECTION
DIVISION OF CORPORATIONS
CLIFTON BUILDING
2661 EXECUTIVE CENTER CIRCLE
TALLAHASSEE, FL 32301

GENTLEMEN"

ATTACHED PLEASE FIND OUR ARTICLES OF ORGANIZATION FOR "THREE CORDS, LLC" AND OUR CHECK OF \$160.00 FOR FILING FEES, CERTIFICATE OF STATUS AND CERTIFICED COPY.

THANK YOU.

THREE CORDS, LI

MRĮ MVAYINE RINEHART

ATTACHED: CHECK FOR \$160.00

COVER LETTER

TO: Registration Division of C			
SUBJECT:	THREE COR Name of Li	205, LLC mited Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles	of Organization and fee(s) a	re submitted for filing.	
Please return all corres	spondence concerning this m	natter to the following:	
	ELisse	Rinehart	
		Name of Person	
•	THRE	E CORDS, LLC Firm/Company	
		Firm/Company	
	684	3 Main Street S	Suite #302
		Address	7, 0
	MIAM	Address Address Address Address Of Lakes, Flacity/State and Zip/Code	33014
	(City/State and Zip Code	•
	WKINE	HHRT (C. COSTATCEA)	LTY. COM
		for future annual report notificat	ion)
For further information of	concerning this matter, pleas	e call:	
\a/a,,,,,	Printed "	205 \ 21/. 2/2	Ą
Na	me of Person A	rea Code Daytime Telephon	e Number
Enclosed is a check for	the following amount:		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	ing Address	Street Address Registration Section	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



June 30, 2015

WAYNE RINEHART 6843 MAIN STREET, STE.302 MIAMI LAKES, FL 33014

SUBJECT: THREE CORDS, LLC Ref. Number: W15000044616

We have received your document for THREE CORDS, LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

Please return the corrected original and one copy of 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) 245-6052.

Maryanne Dickey Regulatory Specialist II New Filing Section

Letter Number: 815A00013719

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY	BP (A)	-
ARTICLE I - Name:	1.	ζ.,
The name of the Limited Liability Company is:		1=
My Three Cords . LCC.	7.2	~
MY Three Cords, LCC.	9	
(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")	mt .	7
ARTICLE II - Address:	97.	
The mailing address and street address of the principal office of the Limited Liability Company is:		0
Principal Office Address: Mailing Address:		
6843 MAIN Street #302 6843 MAIN STRET MIAMI LAKES, FL. 33014 MIAMI LAKES, F. 3	# 302	~
MIAMI LAKES, FL. 33014 MIAMI LAKES, 67.3	13014	
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:		
-(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual of	or	
another business entity with an active Florida registration.)		

The name and the Florida street address of the registered agent are:

Name

6843 Main Street #302

Florida street address (P.O. Box NOT acceptable)

Mirmi Latte, F. 33014

City State Zip

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 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Title:	Name and Address:	1.5
"AMBR" = Authorized Member	Name and Address:	yê. v M
"MGR" = Manager		*1
		, 184
1		= :-
AMBR	ElissE Rineha	at .
	6843 MAIN STV	oat \$ 300
	MIAMI LAKES.	17. 330/Y
MGR		/ 4
MGR	WAGNE RINGI	SART
	6843 NAIN 57	COST # 300
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CLE V: Effective date, if other than the date ffective date is listed, the date must be speed of filing.)	ecific and cannot be more than five business oneet the applicable statutory filing requirement	lays prior to or 90
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CLE V: Effective date, if other than the date ffective date is listed, the date must be speed of filing.) If the date inserted in this block does not manument's effective date on the Department of the CLE VI: Other provisions, if any.	ecific and cannot be more than five business oneet the applicable statutory filing requirement	lays prior to or 90
CLE V: Effective date, if other than the date ffective date is listed, the date must be spee of filing.) If the date inserted in this block does not not mount of seffective date on the Department of the CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a me (In accordance with section constitutes an affirmation I am aware that any false	ecific and cannot be more than five business oneet the applicable statutory filing requirement	nember. ution of this documented herein are true.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)