L15000/60012

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



700276843267

09/14/15--01020--025 **160.00

SECRETARY OF STATE

9/2 2

Office Use Only

♦ COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	Canasta LLC
SUDJE	Name of Limited Liability Company
The end	closed Articles of Organization and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
	Paul Grady
	Name of Person
	Firm/Company
	2885 Sanford Ave SW
	Address
	Grandville, MI 49418
	City/State and Zip Code gradyrp@icloud.com
	E-mail address: (to be used for future annual report notification)
For furth	er information concerning this matter, please call:
	Paul Grady 859 322-8172 at ()
	Name of Person Area Code Daytime Telephone Number
Enclose	ed is a check for the following amount:
\$125.0	O Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \text{Certified Copy (additional copy is enclosed)} \text{\$\ \text{S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)} \text{\$\ \text{Certified Copy (additional copy is enclosed)} \$\ \text{Certified Copy (additional copy is encl

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

(Must	end with the words "Limited Li	ability Company,	"L.L.C.," or "LLC.")	
TICLE II - Address: mailing address and stre	et address of the principal offic	ce of the Limited	Liability Company is:	
<u>Prir</u>	ncipal Office Address:		Mailing Address:	
2308 Canasta Dr.		2885	Sanford Ave SW	
Bradenton Beach	1, FL 34217	Gran	dville, M1 49418	
he Limited Liability Comp	Agent, Registered Office, & loany cannot serve as its own Rean active Florida registration.)	gistered Agent. Y	t's Signature: 'ou must designate an individual or	 33
he Limited Liability Compoter business entity with	pany cannot serve as its own Re an active Florida registration.) reet address of the registered ag	egistered Agent. Y		15 SEP !!
he Limited Liability Compoter business entity with	pany cannot serve as its own Re an active Florida registration.) reet address of the registered ag	egistered Agent. Y		SEP III
he Limited Liability Compoter business entity with	pany cannot serve as its own Re an active Florida registration.) reet address of the registered ag	egistered Agent. Y		15 SEP 11, PM
he Limited Liability Compoter business entity with	pany cannot serve as its own Re an active Florida registration.) reet address of the registered ag	egistered Agent. Y		SEP III, PM 1:
he Limited Liability Compoter business entity with	pany cannot serve as its own Re an active Florida registration.) reet address of the registered ag Don Meilner	egistered Agent. Y gent are: Name	ou must designate an individual or	SEP II, PM
he Limited Liability Compoter business entity with	pany cannot serve as its own Re an active Florida registration.) reet address of the registered ag Don Meilner 2308 Canasta Dr	egistered Agent. Y gent are: Name	ou must designate an individual or	SEP III, PM 1:

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

	والمساهدين المساهدين المساهدين	Name and Address:
	uthorized Member	
"MGR" = Ma AMBR	agei	Paul Grady
	 	2310 Canasta Dr.
		Bradenton Beach, FL 34217
AMBR		Don Meilner
		2308 Canasta Dr.
		Bradenton Beach, FL 34217
		
	•	
(Use attachme	ent if necessary)	
CLE V: Effective	e date, if other than the date	e of filing: September 15, 2015 (OPTIONAL)
ffective date is I	isted, the date must be sp	pecific and cannot be more than five business days prior to or 90 day
e of filing.)		
If the date insert	ted in this block does not	meet the applicable statutory filing requirements, this date will not be
cument's effective	ve date on the Department	of State's records.
CLE VI: Other pr	ovisions, if any.	
	<u> </u>	

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Don Meilner

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)

\$ 5.00 Certificate of Status (Optional)