L/6000 4073/

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone #	<i>f</i>)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)
(Do	ocument Number)	
Certified Copies	_ Certificates c	f Status
Special Instructions to	Filing Officer:	

Office Use Only



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MAR 1 2016

S. GILBERT

COVER LETTER

Division of Corporations
SUBJECT: Plan For Rainy Day LLC. Name of Limited Liability Company
Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Tzy-Yng Williams Name of Person
Name of Person
Firm/Company
1227 Salt Creek Island Dr.
1227 Salt Creek Island Dr. Address
Ponte Vedra Beach, FL 3>081 City/State and Zip Code Palmicoasterental @ xahoo.com
City/State and Zip Code Paluncoasterental a xahop wm
B-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
724-YNG Williams at 904 616-5640 Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \times \text{S130.00 Filing Fee & Certificate of Status} \tag{S155.00 Filing Fee & Certificate of Status & Certificate of Status & Certificate Copy (additional copy is enclosed)}
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 I BILITY COMPANY

The name of the Limited Liability Company is:	grand from
Plan For Rainy Day LLC. (Must end with the words "Limited Liability Company,"L.L.C.," or "LLC.")	16 FEB 22 PH 1:54
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is:	TALL APASSES, PLOSIDA
Principal Office Address: Maliting Addr	
10600 Menaul NE 1227 Salt Creek Albuquerque, NM 87/12 Ponte Vedra B	Island Dr. each, FL 32082
APTICE WITH - Degistered Agent Projectored Office & Registered Agent's Signature	

ŧ.

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Plorida registration.)

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

Hang Lawry

Name

66/2 Barnes Rd S

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

Jackson ville, FL 32216

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..

(CONTINUED)

X Hang No Lawry
Registers Agent's Signature (EQUIRED)

Page Lof 2

Title: "AMBR" = Authorized Member "MGR" = Manuger	Name and Address:	
MGR	Shu-Ting Change 1421 W State Rd, 84, #308	
MGR	Tzy- YNG, Williams 1227 Salt Creek Island Dr. Ponte Vedra Beach, FL 32852	
AMBR	Sunwest Trust Inc as custodium F1610 Account# 0903063	
(Use attachment if necessary)		
n effective date is listed, the date must be spe late of filing.)	of filing:	
n effective date is listed, the date must be spe late of filing.) g: If the date inserted in this block does not n	ecific and cannot be more than five business days prior to or 90 days oneet the applicable statutory filing requirements, this date will not be list	
n effective date is listed, the date must be spa late of filing.) g: If the date inserted in this block does not n document's effective date on the Department of	ecific and cannot be more than five business days prior to or 90 days oneet the applicable statutory filing requirements, this date will not be list	

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