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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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### **COVER LETTER**

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SURTE	CT: ME	RSAN	LLC		
0017,71		Name of Limit	ted Liability Company		
		endment and fee(s) are subnence concerning this matter t	-		
		ARAILYM	MERGENO Name of Person	VA	
		MERSAN	LLC Firm/Company		
		P.O. BOX	15553 Address		
	-	PANAMA CIT	City/State and Zip Code  of Council Com  of the best of the com  of the control o	32406-5553	
For fu	ther information conc	erning this matter, please ca		•	
AL	ZHAN Name of Po	URUMBETOV	at ( <u>850</u> )	<b>3</b> 52-26-6  Daytime Telephone Number	7
Enclos	sed is a check for the f	ollowing amount:			
<b>☑</b> \$2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is encl	Certifica osedi Certified	te of Status &

#### 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

August 15, 2016

ARAILYM MERGENOVA P.O. BOX 15553 PANAMA CITY, FL 32406-5553

SUBJECT: MERSAN LLC Ref. Number: L16000066973 RECEIVEL 2016 NOV -4 PM 12: 45 SECRETARY OF STATE TALLAHASSEE, FLORIDA

We have received your document for MERSAN LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The entity's date of incorporation/organization must be listed in the document.

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.

Jenna D Harris Regulatory Specialist II

Letter Number: 216A00017205

## TO ARTICLES OF ORGANIZATION OF

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nited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
Liability Company were filed on 414116	and assigned
llowing:	
of the limited liability company here:	
words "Limited Liability Company," the designation "LLC" or the ab	obreviation "L.L.C."
icable:	
EET ADDRESS)	
Enter Florida street address	04
Registered Agent:  red agent and agree to act in this capacity. I further ago per and complete performance of my duties, and I am f gistered agent as provided for in Chapter 605, F.S. Or, e registered office address, I hereby confirm that the lin is change.	amiliar with and if this document is
	Illowing:  of the limited liability company here:  words "Limited Liability Company." the designation "LLC" or the absolute:  ET ADDRESS)  Alor registered office address on our records, enter- office address here:  ALZHAN NURUMBETOV  TIZO PATRONIS DR APT 150  Enter Florida street address  PANAMA CITY , Florida  Registered Agent:  red agent and agree to act in this capacity. I further age per and complete performance of my duties, and I am f gistered agent as provided for in Chapter 605, F.S. Or, e registered office address, I hereby confirm that the line

# or removed from our records: MGR = Manager AMBR = Authorized Member <u>Title</u> Address Type of Action <u>ALZHAN</u> NURUMBETOV MGR 7120 PATRONIS DR APT 1504 HAdd ☐ Remove ☐ Change MGR MERUYERT 1912 ISABella awa Add ABOIRARIMOVA Panama City, Fl, AZUAT REMOVE Change □ Add ☐ Remove Change ☐ Add ☐ Remove N Change □ Add

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Filing Fee: \$25.00