## L16000/33623

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
<u> </u>
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
Special instructions to Filing Officer.

Office Use Only



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## COVER LETTER

	ntion Section of Corporations		
SUBJECT:	SANDS Name of L	imiled Liability Company	
The enclosed Arti	cles of Organization and fee(s)	are submitted for filing.	
Please return all c	orrespondence concerning this	matter to the following:	
	Jere	Mame of Person	
	SAND.	Spaner LLC.	
		/irm/Company	
	1916 E. Yo	nge St.	
		Address	
<del></del>	Pensaco	la, 76. 3250	3
		City/State and Zip Code	
	E-mail address: (to be use	City/State and Zip Code  Norrisane gmail.  ed for future annual report notification	con)
For further information	tion concerning this matter, plea		,
<u>Je</u>	ceny Morrison at (	850 530 - 16 Area Code Daytime Telephone	657
	Name of Person	Area Code Daytime Telephone	Number
Enclosed is a chec	ck for the following amount:		
\$125.00 Filing Fe	Se 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)
	Mailing Address	Street Address	
	New Filing Section	New Filing Section	

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

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

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	SANDS paper t end with the words "Limited Liability C	LLC.
(Musi	end with the words "Limited Liability C	empany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and str	reet address of the principal office of the	imited Liability Company is:
Pr	incipal Office Address:	Mailing Address:
	, K 1 (1	mil 6 V CA
	E. Jongest.	1716 E. Yonge ST.
The Limited Liability Con	d Agent, Registered Office, & Registered pany cannot serve as its own Registered han active Florida registration.)	d Agent's Signature: Agent. You must designate an individual or
The Limited Liability Con mother business entity wit	pany cannot serve as its own Registered	
The Limited Liability Con mother business entity wit	npany cannot serve as its own Registered han active Florida registration.)  treet address of the registered agent are:	Agent. You must designate an individual or
The Limited Liability Con mother business entity wit	npany cannot serve as its own Registered han active Florida registration.)  treet address of the registered agent are:	Agent. You must designate an individual or
The Limited Liability Con mother business entity wit	npany cannot serve as its own Registered han active Florida registration.)  treet address of the registered agent are:	Agent. You must designate an individual or
The Limited Liability Con mother business entity wit	pany cannot serve as its own Registered han active Florida registration.)  treet address of the registered agent are:    Verefly Morro   Name	Agent. You must designate an individual or AHASSE OF STATE OF STAT
The Limited Liability Com nother business entity wit	npany cannot serve as its own Registered han active Florida registration.)  treet address of the registered agent are:	Agent. You must designate an individual or AHASSE OF STATE OF STAT

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Page 1 of 2

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	1 10
_AMB /	Decemy Morrison
	Pensacela, 71 32503
	,
E V: Effective date, if other than the dective date is listed, the date must be	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 d
of filing.)	specific and cannot be more than five business days prior to or 90 do of meet the applicable statutory filing requirements, this date will not be
E V: Effective date, if other than the dective date is listed, the date must be of filing.)  the date inserted in this block does not be determined.	specific and cannot be more than five business days prior to or 90 do not meet the applicable statutory filing requirements, this date will not be not of State's records.
E V: Effective date, if other than the dective date is listed, the date must be of filing.)  The date inserted in this block does nament's effective date on the Department.  E VI: Other provisions, if any.	specific and cannot be more than five business days prior to or 90 do not meet the applicable statutory filing requirements, this date will not be not of State's records.
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