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BECRETARY OF STATE
ALLAHASSEE: FLORIO

COVER LETTER

	egistration Section ivision of Corporations		
SUBJECT	BuySmart,LLC.		
Substice		f Limited Liability Company	
The enclos	ed Articles of Organization and fee	s) are submitted for filing.	
Please retu	ırın all correspondence concerning th	is matter to the following:	
	Gregory Lawrence		
		Name of Person	
	Run Smart &	10	
		KC. Firm/Company	
	21628 Berwhich Run		
		Address	
	Estero, Florida, 33928		
	gregory3w@gmail.com	City/State and Zip Code	
		used for future annual report notifica	tion)
For further i	nformation concerning this matter,	lease call:	
	Gregory Lawrence	239 207-6840 t ()	
	Name of Person	Area Code Daytime Telephor	ne Number
Enclosed is	s a check for the following amount:		
\$125.00 F	_		\$160.00 Filing Fee, Certificate of Status & Certified 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 Corpora Clifton Building 2661 Executive Cen	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

·	with the words "Limited	d Liability Company	y, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street a	ddress of the principal o	office of the Limited	l Liability Company is:		
<u>Princip</u>	oal Office Address:		Mailing Addre	<u>ss</u> :	
21628 Berwhich Ru Estero, FLorida 339		Sam	ne		
ARTICLE III - Registered Ag (The Limited Liability Company another business entity with an The name and the Florida street	y cannot serve as its own active Florida registration	n Registered Agent. on.) d agent are:		vidual or TALL AHAS	2016 SEP -:
	A1/39 D 151 D	Name		SEC	8 PH
	21628 Berwhich Rur Florida street addres		acceptable)		$\ddot{5}$
	Estero, Florida 3392	8			22
	City	State	Zip		
Having been named as registered place designated in this certificate	. I hereby accept the app	ointment as register elating to the proper	e above stated limited liabili red agent and agree to act in r and complete performance as provided for in Chapter 6	this capacity. I of my duties, and I	

(CONTINUED)

Page 1 of 2

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMGR	Gregory Lawrence
	21628 Berwhich Run
	Estero, Florida 33928
MGR	Andrew Lawrence
	186 East Fifth St. 2nd Floor
	Brooklyn, NY 11218
MGR	Elaine Lawrence
 -	460 River Rd. Unit 420
	Andover, Ma 01810
(Use attachment if necessary)	
RTICLEV: Effective date if other than the	date of filing: 9-1-2016 (OPTIONAL)
	be specific and cannot be more than five business days prior to or 90 day
ne date of filing.)	
Note: If the date inserted in this block doe	not meet the applicable statutory filing requirements, this date will not be l
he document's effective date on the Depar	

REQUIRED SIGNATURE:

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.

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)

as

Page 2 of 2