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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Email Address:

Account Name : CORP USA

Account Number: 072450003255

Phone

: (305)634-3694

Fax Number

: (305)633-9696

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

FLORIDA LIMITED LIABILITY CO. ALANA & JONATHAN LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

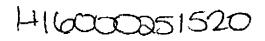
Help

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CORP USA

10/11/2016 9696889908 69:91 9102/11/01





COVER LETTER

	egistration Section vision of Corporations		
SUBJECT	Alana & Jonathan LLC		
3083861		Limited Liabili	ry Company
The enclos	ed Articles of Organization and fee(s)	battimdus sus	for filing.
Please retu	n all correspondence concerning this	matter to the f	gaiwollo
	Jonathun Rapp		
		Name of	Person
		Pirm/Co	sipany
	5850 South Pine Island Road		
	Address		
	Davie, Florida 33328	_	
	sterlingkosher@yahoo.com	City/State and	i Zip Cods
•		sed for finture a	naual report notification)
For further in	formation concerning this matter, ple	ease call:	
	Jonathan Rapp	954	6B0-4787
	Name of Person	Area Code	Daytime Telephone Number
Enclosed is	a check for the following emount:		
7 \$125,00 Fi	ling Fee \$130.00 Filing Fee & Certificate of Status	Cardifi	of Filing Fee & \$160.00 Filing Fee, cd Copy 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 Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

TICLE (I - Address: c mailing address and str	reet address of the principal office	
		of the Limited Liability Company is:
Pr	incipal Office Address:	Mailing Address;
Jonathan Rapp		5850 South Pine Island Road Davie, Florida 33328
e Limited Liability Com ther business entity with	d Agent, Registered Office, & Re npany cannot serve as its own Regis in an active Florida registration.) nreet address of the registered agen	stered Agent. You must designate an individual or
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Fage 1 of 2

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