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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

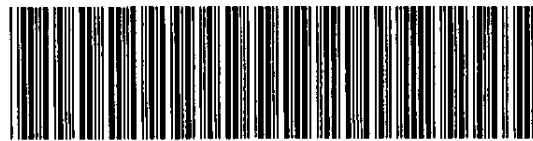
(Business Entity Name)

(Document Number)

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17 JAN 17 PM 6:11

SEP 17 2016
JAN 17 2017

M. MOON

JAN 17 2017



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 21, 2016

RICH GREER
4705 VINCENNES BLVD, STE. 1
CAPE CORAL, FL 33904

SUBJECT: FINDAWAY, LLC.
Ref. Number: W16000071779

17 JAN 17 PM 6:11

RECEIVED
TALLAHASSEE
JAN 17 2017

We have received your document for FINDAWAY, LLC. and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please make sure to sign the document for both required signautre blocks. A typed or printed name is not acceptable for the signature blocks.

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) 245-6052.

Matthew T Moon
Regulatory Specialist II

Letter Number: 516A00022636

RECEIVED
TALLAHASSEE
JAN 17 2017

17 JAN 17 PM 2:46

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Findaway, LLC.

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:

Rich Greer

Name of Person

Firm/Company

4705 Vincennes Blvd. Suite 1

Address

Cape Coral, Florida, 33904

City/State and Zip Code

realopportunity2013@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rich Greer

239

989-6712

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:



\$125.00 Filing Fee



\$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

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

17 JAN 17 PM 5:12

SECRET
FEB 1 2014
DIVISION OF CORPORATIONS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Findaway, LLC.

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

4705 Vincennes Blvd

Suite 1

Cape Coral, FL. 33904

Mailing Address:

P.O. BOX 100402

Cape Coral, FL. 33910

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

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

Rich Greer

Name

4705 Vincennes Blvd. Suite 1

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

Cape Coral

Florida

33904

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..

Rich Greer

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Name and Address:

Rich Greer

P.O. Box 100402

Cape Coral, FL. 33910

MGR

Fredy Ludena

P.O. Box 100402

Cape Coral, FL. 33910

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 10/10/2016 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

Any and all lawful business

REQUIRED SIGNATURE:

Fredy Ludena

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.

Fredy Ludena

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)