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Certified Copies	Certificates	of Status
Special Instructions to Filing Officer:		

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## FLORIDA DEPARTMENT OF STATE Division of Corporations

February 3, 2017

RICHARD YASPARRO P.O. BOX 10853 TAMPA, FL 33679

SUBJECT: SPARRO VENTURES LLC

Ref. Number: W17000010105

We have received your document for SPARRO VENTURES LLC and your check(s) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

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: 617A00002252

New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, Florida 32314 (850) 245-6052

January 20, 2017

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**Division of Corporations:** 

Enclosed please find the corrected Articles of Organization for Sparro Ventures LLC.

Please return the filed copy of the Articles of Organization to the following:

Richard Yasparro P.O. Box 10853 Tampa, FL 33679 ryasparro@gmail.com

Thank you for your cooperation.

Sincerely,

Richard Yasparro

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Article I

The name of the Limited Liability Company is:

Sparro Ventures LLC

Article II

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

503 S Audubon Ave Unit A Tampa, FL 33609

Article III

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

Richard Yasparro 503 S Audubon Ave Unit A Tampa, FL 33609

Having been named as the 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 related 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..

Registered Agent Signature:

Richard Yasparro

## Article IV

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

Title: MGRM Richard Yasparro P.O. Box 10853 Tampa, FL 33679

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.

Signature:

Richard Yasparro

Richard Yasparro 503 S Audubon Ave Unit A Tampa, FL 33609