

L17000216103

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SECRETARY OF STATE
ADM. ASSISTANT

17 OCT 18 AM 10:28

FILED

OCT 19 2017

K. Brumbley

October 17, 2017

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

Reference: Solana Investments LLC Florida Document Number L16000043127

Dear Department:

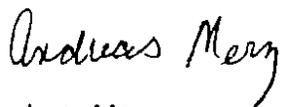
It has come to my attention that my Florida Limited Liability Company has been dissolved.

At this time I would ask that the department of state release my florida document number L16000043127 for my LLC Solana Investments LLC

Further, I am enclosing articles that I would like to file with the state for a new entity.

Thanking you for your assistance with these matters.

Sincerely,

A handwritten signature in cursive script that reads "Andreas Merz".

Andreas Merz

Managing Member

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Solana Investments LLC

(Must contain 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:

Mailing Address:

709 Cape Coral Parkway W
Cape Coral, FL 33914

Same

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:

| | | |
|---|-----------|--------------|
| <u>Ron St. Clair</u> | | |
| Name | | |
| <u>709 Cape Coral Parkway W</u> | | |
| Florida street address (P.O. Box NOT acceptable) | | |
| <u>Cape Coral</u> | <u>FL</u> | <u>33914</u> |
| City | State | Zip |

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA
 17 OCT 18 AM 10:28
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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..

Ronald St. Clair
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

AMBR

Name and Address:

Andreas Merz

Zeughausstrasse46

Galgenen Switzerland 8854

AMBR

Granada Investment of SWFL LLC

709 Cape Coral Parkway W

Cape Coral, FL 33914

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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.

REQUIRED SIGNATURE:

Andreas Merz

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.

Andreas Merz

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)