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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer;	
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COVER LETTER

	v Filing Section ision of Corporations
SUBJECT:	Stone Balloon, LLC.
SUBJECT	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:
ز	lames M. Werkheiser
_	Name of Person
S	Self
_	Firm/Company
2	28222 Robolini Ct
_	Address
ı	Bonita Springs, FL 34135
<u>-</u>	City/State and Zip Code
<u>ju</u>	m.werkheiser@verizon.net E-mail address: (to be used for future annual report notification)
For further inf	formation concerning this matter, please call:
J	ames M. Werkheiser 410 746-6818
_	Name of Person Area Code Daytime Telephone Number
Enclosed is a	a check for the following amount:
\$ 125.00 Fili	

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 FLORIDA LIMITED LIABILITY COMPANY

Stone Balloo				
(M	ust contain the words "Limited	Liability Company, '	'L.L.C.," or "LLC.")	
ARTICLE II - Address The mailing address and	: street address of the principal o	ffice of the Limited	Liability Company is:	
	Principal Office Address:		Mailing Address:	
	28222Robolini Ct		28222 Robolini Ct	
Bonita Spring	Bonita Springs, FL 34135		Bonita Springs, FL 34135	
The Limited Liability C mother business entity	with an active Florida registration a street address of the registered	Registered Agent. Yon.)	t's Signature: 'ou must designate an individual o	or
(The Limited Liability C another business entity	ompany cannot serve as its own with an active Florida registration	Registered Agent. Yon.)		or
The Limited Liability C mother business entity	ompany cannot serve as its own with an active Florida registration a street address of the registered	Registered Agent. Yon.) I agent are:		or
The Limited Liability C mother business entity	ompany cannot serve as its own with an active Florida registration a street address of the registered Linda Werkheiser	Registered Agent. Yon.) I agent are: Name	ou must designate an individual o	or
The Limited Liability C mother business entity	ompany cannot serve as its own with an active Florida registration a street address of the registered Linda Werkheiser 28222 Robolini Ct	Registered Agent. Yon.) I agent are: Name	ou must designate an individual o	or
(The Limited Liability C another business entity	ompany cannot serve as its own with an active Florida registration a street address of the registered Linda Werkheiser 28222 Robolini Ct Florida street address	Registered Agent. Yon.) d agent are: Name s (P.O. Box NOT ac	ou must designate an individual of	or

(CONTINUED)

SECRETARY OF STATE

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	James M. Werkheiser
THE COLUMN TO TH	28222 Robolini Ct
	Bonita Springs, FL 34135
	Bonna Springs, 1 E 54 155
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(Use attachment if necessary)	
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and the second of the second o	of filing:
LE V: Effective date, if other than the date	
LE V: Effective date, it other than the date fective date is listed, the date must be sp	ecific and cannot be more than five business days prior to or 90 da
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Tective date is listed, the date must be sp of filing.)	secific and cannot be more than five business days prior to or 90 da meet the applicable statutory filing requirements, this date will not be
Tective date is listed, the date must be sp of filing.)	pecific and cannot be more than five business days prior to or 90 da meet the applicable statutory filing requirements, this date will not be
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Tective date is listed, the date must be sp of filing.) If the date inserted in this block does not ument's effective date on the Department LE VI: Other provisions, if any.	meet the applicable statutory filing requirements, this date will not be of State's records.

James M. Werkheiser

Typed or printed name of signee

I am aware that any false information submitted in a document to the Department of State

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

constitutes a third degree felony as provided for in s.817.155, F.S.

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)