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(Re	equestor's Name)	
(Ad	dress)	
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PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
(Do	ocument Number)	1
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	

Office Use Only

N. SAMS AUG 3 0 2018



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18 AUG 27 PH 2: 14



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 14, 2018

ALANA RAE SHATKIN 10570 BUENOS AIRES ST HOLLYWOOD, FL 33026

SUBJECT: ALANA RAE ART, LLC Ref. Number: W18000073570

We have received your document for ALANA RAE ART, LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have submitted the document and fees to form a Florida corporation; however, your name implies you wish to form a limited liability company. The name of a corporation cannot contain a limited liability company suffix. Limited Liability Company, L.L.C. and LLC are all limited liability company suffixes. The name of a corporation must contain Corporation, Corp., Incorporated, Inc., Company or Co.

Please correct the suffix or, if you wish to form a limited liability company, submit "Articles of Organization" along with the additional fee(s). Any fees previously submitted with your corporate filing will be applied to your limited liability company filing.

The name must contain a word that will clearly indicate that it is a corporation. Such words include: CORPORATION, CORP., COMPANY, CO., INC., and INCORPORATED.

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.

Nadira D McClees-Sams Regulatory Specialist II

Letter Number: 718A00016783



FLORIDA DEPARTMENT OF STATE Division of Corporations

August 3, 2018

ALANA RAE SHATKIN 10570 BUENOS AIRES ST HOLLYWOOD, FL 33026 US

SUBJECT: ALANA RAE ART LLC Ref. Number: W18000070640 corrected returned

We have received your document for ALANA RAE ART LLC and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The title(s) in the officer/director field(s) is/are not acceptable. Please refer to the following link for acceptable officer/director title information. http://dos.myflorida.com/sunbiz/search/guides/corporation-records/title-abbreviations/

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.

Nadira D McClees-Sams Regulatory Specialist II

Letter Number: 418A00015980

2018 AUG 13 PH 3: 32

18 AUG 27 PH 2: 14

COVER LETTER

Department of State New Filing Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

SUBJECT: ALA	NA RAE ART LLC		
30 2 010	(PROPOSED CORPOR	ATE NAME – <u>MUST INCL</u>	UDE SUFFIX)
Enclosed are an o	original and one (1) copy of the ar	ticles of incorporation an	d a check for:
■ \$70.00 Filing Fee	• • • •	\$78.75 Filing Fee & Certified Copy	\$87.50 Filing Fee, Certified Copy & Certificate of
		ADDITIONAL CO	
FROM: _		e (Printed or typed)	
1 	0570 BUENOS AIRES ST		
		Address	
]	IOLLYWOOD, FL 33026		
	City	. State & Zip	
(954) 649-8387		
_		elephone number	
I:	OANNYSCHATZ@GMAIL.COM		
	E-mail address: (to be use	d for future annual report i	otification)

NOTE: Please provide the original and one copy of the articles.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

<u>ALANA RAE A</u>				
(Must	contain the words "Limited Lia	bility Compan	y, "L.L.C.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and stre	eet address of the principal offic	e of the Limit	ed Liability Company is:	
<u>Pri</u>	ncipal Office Address:		Mailing Address:	
10570 BUENO	S AIRES ST	10	570 BUENOS AIRES ST	
HOLLYWOOD, FL 33026			HOLLYWOOD, FL 33026	
ARTICLE III - Registered The Limited Liability Com	Agent, Registered Office, & I	Registered Ag		
ARTICLE III - Registered The Limited Liability Com- nother business entity with	Agent, Registered Office, & I	Registered Ag	ent's Signature:	100 E
ARTICLE III - Registered The Limited Liability Com another business entity with	Agent, Registered Office, & I pany cannot serve as its own Re an active Florida registration.)	Registered Ag	ent's Signature: t. You must designate an individual or	
ARTICLE III - Registered The Limited Liability Com another business entity with	Agent, Registered Office, & I pany cannot serve as its own Re an active Florida registration.) rect address of the registered ag	Registered Ag	ent's Signature: t. You must designate an individual or	HJU 2 / TH
ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, & I pany cannot serve as its own Re an active Florida registration.) rect address of the registered ag	Registered Aggistered Agen ent are:	ent's Signature: t. You must designate an individual or	111 / 2 ack
ARTICLE III - Registered The Limited Liability Com another business entity with	Agent, Registered Office, & I pany cannot serve as its own Re an active Florida registration.) rect address of the registered ag ALANA SHATKIN N	Registered Aggistered Agen ent are:	tent's Signature: I. You must designate an individual or	HOU E 1
ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, & I pany cannot serve as its own Re an active Florida registration.) rect address of the registered ag ALANA SHATKIN N 10570 BUENOS AIRE	Registered Aggistered Agen ent are:	tent's Signature: I. You must designate an individual or	400 E 7 TH

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

"AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager AMBR	AL ANIA CLIATIZINI	
AIWDR	ALANA SHATKIN	
	10570 BUENOS AIRES ST	
	HOLLYWOOD, FL 33026	· · · · · · · · · · · · · · · · · · ·
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E V: Effective date, if other than the date of ective date is listed, the date must be specifiling.) the date inserted in this block does not ment's effective date on the Department of E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a meminal this document is executed I am aware that any false in constitutes a third degree fermion of the constitutes at	et the applicable statutory filing requirements, this State's records. ber or an authorized representative of a membrian accordance with section 605.0203 (1) (b), Floration submitted in a document to the Department of the Depar	er.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

as

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

ARTICLE IV-