## 180000000

| (Re                     | equestor's Name)   |             |
|-------------------------|--------------------|-------------|
| (Ad                     | idress)            |             |
| (Ad                     | ldress)            |             |
| (Cit                    | ty/State/Zip/Phone | = #)        |
| PICK-UP                 | ☐ WAIT             | MAIL        |
| (Bu                     | siness Entity Nar  | ne)         |
| (Do                     | ocument Number)    |             |
| Certified Copies        | _ Certificates     | s of Status |
| Special Instructions to | Filing Officer:    |             |
|                         |                    |             |
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Office Use Only



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## COVER LETTER

|            | few Filing Section  Ovision of Corporations  |
|------------|--|
| our at Ci  | 2Can Craft LLC   |
| SUBJECT    | Name of Limited Liability Company  |
|            | sed Articles of Organization and fee(s) are submitted for filing.  |
| Please ret | um all correspondence concerning this matter to the following:   |
|            | Connie Howard  |
|            | Name of Person   |
|            | 2Can Craft LLC   |
|            | Firm/Company   |
|            | 2638 Nassau St   |
|            | Address  |
|            | Sarasota FL 34231  |
|            | City/State and Zip Code  |
|            | 2cancraftfun@gmail.com  E-mail address: (to be used for future annual report notification)   |
| For furthe | r information concerning this matter, please call:   |
|            | Connie Howard 941 400-3998   |
|            | Name of Person Area Code Daytime Yelephone Number  |
|            | d is a check for the following amount:   |
| \$125.00   | Piling Fee S130.00 Filing Fee S155.00 Filing Fee S160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) |
|            | Mailing Address  New Filing Section  Division of Corporations  Division of Corporations  Division of Corporations  Clifton Building  |

P.O. Box 6327 Taliahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 21, 2018

CONNIE S HOWARD 2638 NASSAU ST SARASOTA, FL 34237

SUBJECT: 2 CAN CRAFT LLC Ref. Number: W18000101272

We have received your document for 2 CAN CRAFT 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):

Please complete Article(s).

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.

Keyna E Page Regulatory Specialist II

Letter Number: 318A00023909

www.sunbiz.org

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| 2Can Craft LLC   |   |  |  |
|--|---|--|--|
| (Must con  | rain the words "Limited Liab  | bility Company, "                                      | L.L.C.," or "LLC.")                                  |
| RTICLE II - Address:<br>he mailing address and street a  | iddress of the principal offic  | e of the Limited I                                     | Liability Company is:                                |
| Princit  | oal Office Address:   |  | Mailing Address:                                     |
| 0.000  | a) n  | 2638   | Nassau St  |
| 1144 Southoate Utt   | 116   |  |  |
| The Limited Liability Compan   | gent, Registered Office, & I  | Registered Agen  | t's Signature:<br>You must designate an individual o |
| Sarasota FL 34239  ARTICLE III - Registered Ag The Limited Liability Companion ther business entity with an  | gent, Registered Office, & Pay cannot serve as its own Reactive Florida registration.)  | Registered Agen<br>egistered Agent. Y                  | t's Signature:                                       |
| Sarasota FL 34239  ARTICLE III - Registered Ag The Limited Liability Compan another business entity with an  | gent, Registered Office, & Pay cannot serve as its own Reactive Florida registration.)  address of the registered as Connie Howard                  | Registered Agen<br>egistered Agent. Y                  | t's Signature:                                       |
| Sarasota FL 34239  | gent, Registered Office, & Pay cannot serve as its own Reactive Florida registration.)  address of the registered as Connie Howard                  | Registered Agent. Y<br>egistered Agent. Y<br>gent are: | t's Signature:                                       |
| Sarasota FL 34239  ARTICLE III - Registered Ag  (The Limited Liability Compananother business entity with an | y cannot serve as its own Reactive Florida registration.)  address of the registered as  Connie Howard  | Registered Agent. Y<br>egistered Agent. Y<br>gent are: | t's Signature:<br>'ou must designate an individual o |
| Sarasota FL 34239  ARTICLE III - Registered Ag The Limited Liability Compan another business entity with an  | gent, Registered Office, & Ity cannot serve as its own Reactive Florida registration.)  address of the registered as  Connie Howard  2638 Nassau St | Registered Agent. Y<br>egistered Agent. Y<br>gent are: | t's Signature:<br>You must designate an individual o |

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)

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ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager Lora A Rinehart MGR. 2638 Nassau St Sarasota FL 34231 Connie S Howard MGR 2638 Nassau St Sarasota FL 34231 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: December 01, 2018 \_\_ (OPTIONAL) (If an effective date is listed, the date must be specific and counct 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: 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. Connie S Howard Typed or printed name of signee Filing Fees: 5)25.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)