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(Requestor's Name)		
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PICK-UP	WAIT	MAIL
(Business Entity Name)		
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## Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

### **ORDER FORM**

TO Florida Department of State

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303 corphelp@dos.myflorida.com

850-245-6051

FROM

Melissa Stops mstops@incserv.com 850.656.7953

**REQUEST DATE** 12/2/2019

**PRIORITY** Routine

OUR REF # (Order ID#) 788395

ORDER ENTITY
CASTNET GROUP LLC

# PLEASE PERFORM THE FOLLOWING SERVICES:

CASTNET GROUP LLC (FL)

New LLC filing - Please provide a certified copy as evidence.

#### NOTES:

\$155.00 Authorized

Email address for annual report reminders: Pconnaghan@wyrick.com

# **RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Monday, December 02, 2019 Page 1 of 1

# ARTICLES OF ORGANIZATION OF CASTNET GROUP LLC

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

#### CASTNET GROUP LLC

#### **ARTICLE II - Address:**

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

19111 Collins Avenue Apt. 2301 Sunny Isles Beach, Florida 33160

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Svetlana Frayman 19111 Collins Avenue Apt. 2407 Sunny Isles Beach, Florida 33160

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 608, F.S.

Svellana Frayman
Registered Agent's Signature

Clay Martin

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Clay O. Martin, Esq., Authorized Representative, not a member

Typed or printed name of signee