LZ4000149095

(Requestor's Name)
(Address)
(Address)
(national)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
•
(Document Number)
(Bocument Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
3





500426296135

04/01/24-01001-008 7 PR -1 PH 1: 11

RECEIVED 2024 APR - 1 AM 11: 05 SECRETARY OF STATE ALLAMASSEE PLANE.

CORPORATE When you need ACCESS to the world ACCESS, ____

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

	CERTIFIED COP	Y	
xx	РНОТОСОРУ		
	GS		
XX	FILING	LLC	
	DEREK'S DOG HO	OUSE, LLC DOCUMENT #)	
	CORPORATE NAME AND	DOCUMENT #)	
	CORPORATE NAME AND	DOCUMENT #)	
	CORPORATE NAME AND	DOCUMENT #)	2022
(CORPORATE NAME AND		APR - SS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

() d	use, LLC		
(Must	contain the words "Limited Liz	ability Company,	"L.L.C.," or "LLC.")
RTICLE II - Address:			
he mailing address and stre	eet address of the principal offic	ce of the Limited	Liability Company is:
<u>Pri</u>	ncipal Office Address:		Mailing Address:
860 13th Street 1	N	860	13th Street N
Naples, FL 34102			es, FL 34102
RTICLE III - Registered he Limited Liability Comp	Agent, Registered Office, & pany cannot serve as its own Re an active Florida registration.)	gistered Agent.	t's Signature: (ou must designate an individual or
RTICLE III - Registered The Limited Liability Compositer business entity with	pany cannot serve as its own Ro an active Florida registration.)	egistered Agent. \	nt's Signature: You must designate an individual or
RTICLE III - Registered The Limited Liability Compositer business entity with	pany cannot serve as its own Ro an active Florida registration.) reet address of the registered ag	egistered Agent. \	nt's Signature: ∕ou must designate an individual or
RTICLE III - Registered The Limited Liability Compositer business entity with	pany cannot serve as its own Re an active Florida registration.) reet address of the registered ag 	egistered Agent. \	t's Signature: (ou must designate an individual or
RTICLE III - Registered The Limited Liability Compositer business entity with	pany cannot serve as its own Re an active Florida registration.) reet address of the registered ag 	egistered Agent. Y gent are:	it's Signature: You must designate an individual or
RTICLE III - Registered The Limited Liability Compositer business entity with	pany cannot serve as its own Re an active Florida registration.) reet address of the registered ag <u>Jeff Novatt, Esq.</u>	gent are:	ou must designate an individual or
RTICLE III - Registered The Limited Liability Compositer business entity with	pany cannot serve as its own Re an active Florida registration.) reet address of the registered ag	gent are:	ou must designate an individual or

(CONTINUED)

Registered Agent's Signature (REQUIRED)

2024 APR - 1 PH 18 18

"AMDD" -	Authorized Member	Name and Address:
"MGR" = M		
MGR	ignigizer	Joe Beiz
		860 13th Street N
		Naples, FL 34102
		
·		
(Use attachn	nent if necessary)	
	•	f filing: (OPTIONAL)
a effective date is	listed, the date must be spec	ific and cannot be more than five business days prior to or 90 days afte
ate of filing.)	erted in this block does not me	et the applicable statutory filing requirements, this date will not be listed a
locument's effect	ive date on the Department of	State's records.
limited liability of	provisions, if any.	ed limited liability company.
	ompany is a managor-manag	sa mined habitty company.

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.

Jeff Novatt, Esq., Authorized Representative
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)

NAPR-L PM TELL
GROSSEE, FL