L20000358373

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

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D O'KEEFE
NOV 21 2020

W2-20525

FLORIDA DEPARTMENT OF STATE
Division of Corporations

20 OCT 30 PM 5:27

October 19, 2020

ROCCO DIDONATO
AMELIAS SHOP LLC
P.O. BOX 161782
ALTAMONTE SPRINGS, FL 32714

SUBJECT: AMELIAS SHOP LLC
Ref. Number: W20000120525

We have received your document for AMELIAS SHOP LLC and your check(s) totaling $130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please include the manager's name in Article IV.

The registered agent must sign accepting the designation.

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.

DANIEL L O'KEEFE
Regulatory Specialist II

Letter Number: 220A00020609

2020 OCT 30 AM 9:57

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Amelias Shop LLC
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:

Rocco DiDonato
Name of Person

Amelias Shop LLC
Firm/Company

380 Los Altos way Apt #204
Address

Altamonte Springs, Florida 32714
City/State and Zip Code

rdidonato92@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rocco DiDonato at (207) 400-6363
Name of Person | Area Code | Daytime Telephone Number

Enclosed is a check for the following amount:

☐ $125.00 Filing Fee

☐ $130.00 Filing Fee & Certificate of Status

☐ $155.00 Filing Fee & Certified Copy (additional copy is enclosed)

☐ $160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

Amelias Shop LLC
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	**Mailing Address:**
380 Los Altos way Apt #204	380 Los Altos way Apt #204
Altamonte Springs, Florida 32714	Altamonte Springs, Florida 32714

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Rocco DiDonato
Name

Altamonte Springs, Florida 32714
Florida street address (P.O. Box **NOT** acceptable)

Altamonte Springs	Florida	32714
City	State	Zip

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:

Title:	**Name and Address:**
"AMBR" = Authorized Member "MGR" = Manager	
MGR	Rocco DiDonato 380 Los Altos way Apt #204 Altamonte Springs, Florida 32714

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: November 1st 2020 . (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot 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.

Rocco DiDonato
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)