L2200013371d

(Requestor's Name)	
		
(Address)	
	Address)	
V	Addiess	
(City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
<u> </u>	Duran Gutte Mana	
(Business Entity Name)	
	Document Number)	
Certified Copies	Certificates of S	tatus
		
Special Instructions to	Filing Officer:	
L	<u>. </u>	





700383946597

04/01/22--01001--025 **375.00

2022 HAR 31 PH 4:51

<u>ڊ</u> .

SECRETIAN OF STA

CORPORATE ACCESS,

When you need ACCESS to the world

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 COPY	
X	РНОТОСОРУ	
	CUS	
X	FILING	LLC
3	030 NE 10 TH AVE, LLC	
	CORPORATE NAME AND DOCUMEN	VT #)
((CORPORATE NAME AND DOCUMEN	₹T #)
_		
((CORPORATE NAME AND DOCUMEN'	₹1 #)
(6	CORPORATE NAME AND DOCUMEN	VT #)
	CORPORATE NAME AND DOCUMEN'	ST #\
(1	CORPORATE NAME AND DOCUMEN	· 1 · π /
(1	CORPORATE NAME AND DOCUMEN	VT #)

COVER LETTER

TO:	New Filing Sect Division of Corp				
SUBJE	3030 NE	10th Ave, LLC			
SUBJE	CI:	Name of I	Limited Liabil	ity Company	
The enc	closed Articles of (Organization and fee(s)	are submittee	for filing.	
		ndence concerning this			
	Karl Messi	ner			
			Name of	Person	
			Firm/Co	ompany	
	7901 4th S	St N STE 300		<u> </u>	
			Add	ress	
	St. Petersl	ourg FL 33702			
	1/11/4	and Compiles	City/State ar	nd Zip Code	
		er+LLC@gmail.co		annual renort notificati	on)
r c 4				amuat report notificati	,
ror lurth	er information cor	scerning this matter, ple	asc can.		
	Karl Messr	nerati	724	_, 799-1097 _)	
	Name	e of Person	Area Code	Daytime Telephon	e Number
Enclose	ed is a check for th	ne following amount:			
	5.00 Filing Fee	□\$130.00 Filing Fee Certificate of Status	Certif	55.00 Filing Fee & ied Copy nal copy is enclosed)	☐\$160,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New Fi Divisio P.O. B	g Address ling Section on of Corporations ox 6327		Street Address New Filing Section Der The Centre of Tallaha 2415 N. Monroe Street	assee ct. Suite 810
	Tallaha	assee, FL 32314		Tallahassee, FL 3230	D.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

ARTICLE I - Name:

The name of the Limited Liability Company is:

2022 MAR 31 AM 11: 33

3030 NE 10th Ave, LLC

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

SECRETARY OF STATE TALLAHASSEE, FL

ARTICLE II - Address:

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

Mailing Address:
7901 4th St N STE 300
St. Petersburg FL 33702

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:

Registered Ager	nts Inc.	
	Name	
7901 4th St N S	TE 300	
Florida street address	s (P.O. Box <u>NOT</u> ac	cceptable)
St. Petersburg	FL	33702
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)

Title:	Name and Address:
"AMBR" = Authorized Membe	er
"MGR" = Manager	
Member	Karl Messner, as Trustee of Messner Family Trust
	7901 4th SLN STE 300
	St. Petersburg FL 33702
Member	Bethany Messner, as Trustee of Messner Family Trust
-	7901 4th St N STE 300
	St. Petersburg FL 33702
	7901 4th St N STE 300 St. Petersburg FL 33702
	mr. =
(If an effective date is listed, the date n the date of filing.)	an the date of filing:
REOURED SIGNATURE:	
	fare memer
This documen I am aware the constitutes a t	are of a member or an authorized representative of a member, at is executed in accordance with section 605,0203 (1) (b), Florida Statutes, at any false information submitted in a document to the Department of State hird degree felony as provided for in s.817,155, F.S.
Karl M	Messner
	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)

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