

L220000307087

(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:

Office Use Only



500390792775

07/12/22 01:24:016 **125.00

S. CHATHAM
JUL 12 2022

Division of Public
Administration
TALLAHASSEE, FLORIDA

RECEIVED
2022 JUL 12 PM 2:58

22 JUL 12 PM 2:58

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Chicongo, LLC

- _____ Art of Inc. File _____
- _____ LTD Partnership File _____
- _____ Foreign Corp. File _____
- _____ L.C. File _____
- _____ Fictitious Name File _____
- _____ Trade/Service Mark _____
- _____ Merger File _____
- _____ Art. of Amend. File _____
- _____ RA Resignation _____
- _____ Dissolution / Withdrawal _____
- _____ Annual Report / Reinstatement _____
- _____ Cert. Copy _____
- _____ Photo Copy _____
- _____ Certificate of Good Standing _____
- _____ Certificate of Status _____
- _____ Certificate of Fictitious Name _____
- _____ Corp Record Search _____
- _____ Officer Search _____
- _____ Fictitious Search _____
- _____ Fictitious Owner Search _____
- _____ Vehicle Search _____
- _____ Driving Record _____
- _____ UCC 1 or 3 File _____
- _____ UCC 11 Search _____
- _____ UCC 11 Retrieval _____
- _____ Courier _____

22 JUL 12 PM 2:17

Signature _____

Requested by: SETH

07/12

Name _____

Date _____

Time _____

Walk-In _____

Will Pick Up _____

**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY
CHICONGO, LLC**

ARTICLE I - NAME

The name of the limited liability company is **CHICONGO, LLC**.

ARTICLE II - ADDRESS

The limited liability company's mailing address is P.O. Box #280, Lawrence, NY 11559 and the street address of the principal office is 12 Bayview Avenue, #280, Lawrence, NY 11559.

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE AND
REGISTERED AGENT'S ACCEPTANCE**

The name and address of the registered agent and office is:

Blalock Walters, P.A.
802 11th Street West
Bradenton, Florida 34205

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, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relative to the proper and complete performance of such duties, and is familiar with and accepts the obligations of the position as registered agent as provided for in Chapter 605, Florida Statutes.



Registered Agent

ARTICLE IV - MANAGEMENT

The limited liability company is to be manager-managed.

IN WITNESS WHEREOF, these Articles of Organization are executed on this 12th day of July, 2022.



Jennifer Schembri, authorized representative