Division of Corporations **Electronic Filing Cover Sheet** 

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H22000386388 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : I20180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. \*\*

Email Address:\_\_\_

## FLORIDA LIMITED LIABILITY CO. **BREAKFAST STATION 18, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

(((H22000386388 3)))

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - NAME OF LIMITED LIABILITY COMPANY

THE NAME OF THE LIMITED LIABILITY COMPANY IS:

**BREAKFAST STATION 18, LLC** 

#### ARTICLE II - ADDRESS OF LIMITED LIABILITY COMPANY

THE PRINCIPAL PLACE OF BUSINESS OF THE LIMITED LIABILITY COMPANY IS:

31180 A & B CORTEZ BLVD. BROOKSVILLE, FLORIDA 34602

THE MAILING ADDRESS OF THE LIMITED LIABILITY COMPANY IS:

8405 NORTHCLIFFE BLVD. SPRING HILL, FLORIDA 34606

### ARTICLE III - REGISTERED AGENT AND OFFICE

THE NAME OF THE REGISTERED AGENT AND THE STREET ADDRESS OF THE REGISTERED OFFICE OF THE LIMITED LIABILITY COMPANY IS:

CHRISTOPHER J. ZAHRINGER 8405 NORTHCLIFFE BLVD. SPRING HILL, FLORIDA 34606 22 NOV

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, FLORIDA STATUTES.

(((H22000386388 3)))

DATED: 11/10/2022

Christopher J. Zahringer

## ARTICLE IV - MANAGEMENT AND MEMBERS

THE NAME AND ADDRESS OF EACH MANAGER, MANAGING MEMBER, OR MEMBER IS AS FOLLOWS:

MANAGER/MEMBER:

CHRISTOPHER J. ZAHRINGER

11208 MIRAGE AVENUE

BROOKSVILLE, FLORIDA 34614

MEMBER:

JESSE MARTINE

14130 BOWIE ROAD

WEEKI WACHEE, FLORIDA 34614

MEMBER:

WILLIAM DIENES

2297 W. TEE CIRCLE

DUNNELLON, FLORIDA 34434

MEMBER:

JEREMY D. PETERSON

9105 S. ZANMER DRIVE

FLORAL CITY, FLORIDA 34436

MEMBER:

JOLENE BLESSING

10 TUPELO COURT

HOMOSASSA, FLORIDA 34446

MEMBER:

BRIAN R. NELSON

3270 TURNING BRIDGE STREET

LAS VEGAS, NEVADA 89135

DATED: 11/10/2022

X Chis

CHRISTOPHER J. ZAHRINGER

IN ACCORDANCE WITH SECTION 605.0203(1)(b), FLORIDA STATUTES, THE EXECUTION OF THIS DOCUMENT CONSTITUTES AN AFFIRMATION UNDER PENALTIES OF PERJURY THAT THE FACTS STATED HEREIN ARE TRUE.

CD.