

L23000322822

Division of Corporations

Florida Department of State
Division of Corporations
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Division of Corporations
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Account Name : HUBCO
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Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: JCHOINARD@FTMYERSCPA.COM

FLORIDA LIMITED LIABILITY CO.
The Sanibel Lighthouse Icecream, LLC

Certificate of Status	1
Certified Copy	0
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

The Sanibel Lighthouse Icecream, LLC

(Must end with 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:

362 Periwinkle Way Unit 5
Sanibel, FL 33957

16970 San Carlos Blvd PMB 305
Fort Myers, FL 33908

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:

Elke Podlasek
Name
18210 Old Pelican Bay Drive
Florida street address (P.O. Box **NOT** acceptable)
Fort Myers Beach FL 33931
City 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.

Elke Podlasek

Registered Agent's Signature (REQUIRED)

Elke Podlasek

(CONTINUED)

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

Name and Address:

Elke Podlasek

18210 Old Pelican Bay Drive

Fort Myers Beach, FL 33931

AMBR

Brian Podlasek

18210 Old Pelican Bay Drive

Fort Myers Beach, FL 33931

AMBR

Maksymillian Kolshak Jr.

3616 Heritage Lane

Fort Myers, FL 33908

AMBR

Bridget Kolshak

3616 Heritage Lane

Fort Myers, FL 33908

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (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.)

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Elke Podlasek

Signature of a member or an authorized representative of a member.

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

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.)

Elke Podlasek

Typed or printed name of signer

FILED ASSESSOR

2023 JUL 7 AM 6:49