

**L02000022024**

Requester's Name

Albert S. Lagano, P.A.  
P.O. Box 897  
Melbourne, FL 32902

FL LLC 8/23

Office Use Only

MJH

**CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):**

1. forms \$125.00  
00789-00524-02827-00676-00671 W02-15518  
(Corporation Name) (Document #) 600005574356--5  
-05/20/02--01045--013  
\*\*\*\*\*70.00 \*\*\*\*\*70.00
2. \_\_\_\_\_  
(Corporation Name) (Document #)
3. \_\_\_\_\_  
(Corporation Name) (Document #) 600005574356--5  
-08/26/02--01034--020  
\*\*\*\*\*55.00 \*\*\*\*\*55.00
4. \_\_\_\_\_  
(Corporation Name) (Document #)

- ☐ Walk in ☐ Pick up time \_\_\_\_\_ ☐ Certified Copy  
☐ Mail out ☐ Will wait ☐ Photocopy ☐ Certificate of Status

**NEW FILINGS**

- ☐ Profit  
☐ Not for Profit  
☐ Limited Liability  
☐ Domestication  
☐ Other

**OTHER FILINGS**

- ☐ Annual Report  
☐ Fictitious Name

**AMENDMENTS**

- ☐ Amendment  
☐ Resignation of R.A., Officer/Director  
☐ Change of Registered Agent  
☐ Dissolution/Withdrawal  
☐ Merger

**REGISTRATION/QUALIFICATION**

- ☐ Foreign  
☐ Limited Partnership  
☐ Reinstatement  
☐ Trademark  
☐ Other

FILED  
02 AUG 23 AM 9:05  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

Examiner's Initials



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State

May 29, 2002

ALBERT S. LAGANO, P.A.  
P.O. BOX 897  
MELBOURNE, FL 32902

SUBJECT: ERCILDOUNE BOWLING LANES, L.L.C.  
Ref. Number: W02000015518

We have received your document for ERCILDOUNE BOWLING LANES, L.L.C. and your check(s) totaling \$70.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The forms submitted do not meet the requirements to file an LLC, please complete the attached Articles of Organization and return for processing.,

The fees to file a Florida Limited Liability Company or register a Foreign Limited Liability Company are as follows: \$100 filing fee; and \$25 registered agent designation fee. Please include an additional \$30 for each certified copy requested (optional) and \$5.00 for each certificate of status requested (optional).

There is a balance due of \$55.00.

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) 245-6967.

Michelle Hodges  
Document Specialist

Letter Number: 302A00034598

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

Ercildoune Bowling Lanes, LLC

## ARTICLE II - Address:

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

14235 N. U.S. Highway 1, Sebastian, FL 32978

## ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Albert S. Lagano

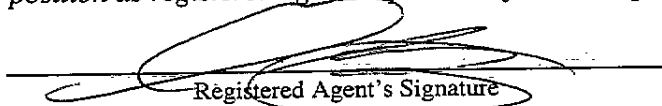
Name

551 S. Apollo Blvd. Suite 103

Florida street address (P.O. Box **NOT** acceptable)  
Melbourne, FL 32901

City, State, and 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 608, F.S..*

  
Registered Agent's Signature

## Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Richard M. Anderson  
Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Richard M. Anderson

Typed or printed name of signee

### Filing Fees:

\$100.00 Filing Fee for Articles of Organization  
\$ 25.00 Designation of Registered Agent  
\$ 30.00 Certified Copy (Optional)  
\$ 5.00 Certificate of Status (Optional)

02 AUG 23 AM 9:05  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED