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DIVISION OF CORPORATIONS
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u

Department of State
Division of Corporations
Registration Section

June 3, 2003

Dear Sir:

I am submitting articles
of organization for Stadium Style
to become an LLC.

W03-16867

Thank you,

Julie Mook

404 Fern Cliff

Temple Terrace, FL 33617

813-985-3002

813-376-2923

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FLORIDA DEPARTMENT OF STATE

Glenda E. Hood
Secretary of State

June 12, 2003

Julia
JULIE MOOK
404 FERN CLIFF
TEMPLE TERRACE, FL 33617

SUBJECT: STADIUM STYLE, LLC
Ref. Number: W03000016863

We have received your document for STADIUM STYLE, LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6958.

Lee Rivers
Document Specialist

Letter Number: 803A00036489

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: Stadium Style, LLC.

ARTICLE II - Address:

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

404 Fern Cliff Ave. Temple Terrace

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

Fl.
33601

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

Julie Mook

Name

404 Fern Cliff Ave.

Florida street address (P.O. Box **NOT** acceptable)

Temple Terrace, FL 33617

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.

Julie Mook

Registered Agent's Signature

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

Julie Mook

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.)

Julie Mook

Typed or printed name of signer

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)

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