

LO4000026163

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

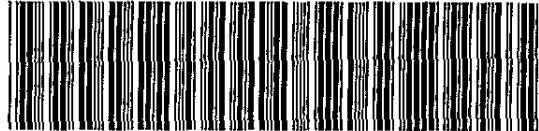
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700031263757

03/29/04--01051--005 **130.00

RECEIVED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
04 MAR 29 PM 1:42

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Lucky Strike Investments LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Melanie A DiLella
(Name of Person)

Lucky Strike Investments LLC
(Firm/Company)

2791 Ardisia Lane
(Address)

Naples, FL 34109
(City/State and Zip Code)

For further information concerning this matter, please call:

Melanie A DiLella at (239) 566-1257
(Name of Person) (Area Code & Daytime Telephone Number)

239-250-8054 cell

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

04 MAR 29 PM 1:42
FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

**ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is:

LUCKY STRIKE INVESTMENTS LLC

ARTICLE II - Address:

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

Principal Office Address:

2791 ARDISIA LANE

NAPLES, FL 34109

Mailing Address:

2791 ARDISIA LANE

NAPLES, FL 34109

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

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

Melanie A DiLella

Name

2791 Ardisia Lane

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

Naples

FLORIDA 34109

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, Florida Statutes..

Melanie A. DiLella

Registered Agent's Signature

FILED
MAR 29 PM 1:42
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF S.W. FLA.

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

Melanie A DiLella

2791 Ardisia Lane

Naples, FL 34109

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Melanie A. DiLella
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.)

Melanie A Hanson DiLella
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)