

Division of Corporations

<https://efilebiz.org/scripts/efilcovr.exe>

06000091769

Florida Department of State  
Division of Corporations  
Public Access System

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 SEP 19 AM 9:45

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.

((H06000231565 3)))



H060002315653AEC

**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)205-0383

From: Account Name : A 1 A CORPORATE SERVICES, INC.  
Account Number : I20010000247  
Phone : (800)494-3124  
Fax Number : (305)675-2811

**FLORIDA/FOREIGN LIMITED LIABILITY CO.**

**THOMAS LERETSIS LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

RECEIVED  
06 SEP 19 PM 2:46  
DIVISION OF CORPORATION

Electronic Filing Menu

Corporate Filing Menu

Help

H06000231565 3

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

In compliance with Chapter 608, F.S.

**ARTICLE I: NAME**

The name of the Limited Liability Company is:

**THOMAS LERETSIS LLC**

**ARTICLE II: Address**

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


2710 SILVERCREEK DR  
GREEN COVE SPRINGS FL 32043

**ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED  
AGENT SIGNATURE**

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

THOMAS LERETSIS III  
6 RYAN DRIVE  
PALM COAST, FLORIDA 32164

Having been named as registered agent 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.

x 

THOMAS LERETSIS III / Registered Agent's Signature

**ARTICLE IV: MANAGEMENT**

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

H06000231565 3

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 SEP 19 AM 9:45

H06000231565 3

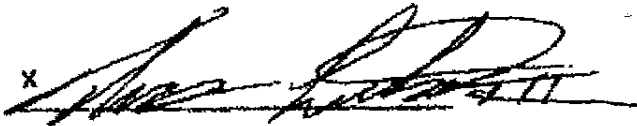
PAGE 2 THOMAS LERETSIS LLC

ARTICLE V: MEMBERS (optional)

**MANAGING MEMBER:**

THOMAS LERETSIS III  
6 RYAN DRIVE  
PALM COAST, FLORIDA 32164

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
06 SEP 19 AM 9:45

x 

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.)

THOMAS LERETSIS III

H06000231565 3