

L15000040102

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

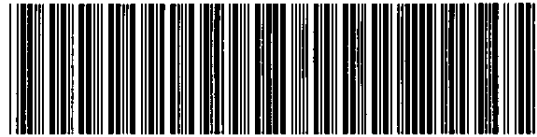
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
DEPARTMENT OF STATE
DIVISION OF CORPORATE
15 MAR -4 PM 4:30
NOT IN REPLY
TO AGENCY OF FILING
SUFFICIENCY OF FILING

FILED
15 MAR -4 PM 4:05
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. Burch MAR -15 2015

Advanced Incorporating Service, Inc.

1317 California Street
P.O. Box 20396
Tallahassee, FL 32316

Phone: 850-222-CORP
Fax: 850-575-2724
Email: orders@aisincfl.com
Website: www.aisincfl.com

NAME OF ENTITY <u>Top Hat LV, LLC</u>	FOR OFFICE USE ONLY

PICK ONE:

☒ CERTIFIED COPY ☐ PHOTOCOPY ☐ C.U.S.

FILING:

☐ CORPORATION ☒ LLC ☐ LIMITED PARTNERSHIP ☐ GENERAL PARTNERSHIP
☐ FICTITIOUS NAME ☐ SERVICE MARK/TRADEMARK ☐ AMENDMENT
☐ FOREIGN QUALIFICATION ☐ JUDGMENT LIEN
☐ OTHER _____

RETRIEVAL:

☐ GOOD STANDING CERT/C.U.S. ☐ CERTIFIED COPY ☐ PHOTOCOPY
Of _____

APOSTILLE/CERTIFICATION REQUEST:

Country _____

Amount of Documents _____

DATE 3/4/15 TIME _____

Notes: _____

ARTICLES OF ORGANIZATION FOR

TOP HAT LV, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Act, Chapter 605, hereby adopts the following Articles of Organization.

ARTICLE I: NAME

The name of the company is **TOP HAT LV, LLC**

ARTICLE II: PRINCIPAL OFFICE

The principal office and mailing address of the company is **907 Woodbridge Court, Safety Harbor, FL 34695.**

ARTICLE III: MANAGERS

The name and address of the initial Managers of the company are:
Marti Moulson, Manager, 907 Woodbridge Court, Safety Harbor, FL 34695
Tracy Moulson, Manager, 907 Woodbridge Court, Safety Harbor, FL 34695

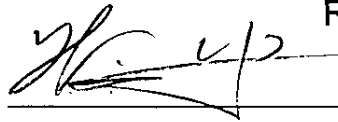
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TALLAHASSEE, FLORIDA

ARTICLE IV: REGISTERED AGENT AND ADDRESS

The name and address of the initial Registered Agent of the company is **Marti Moulson, 907 Woodbridge Court, Safety Harbor, FL 34695.**

The undersigned has executed these Articles of Organization this 4th day of March 2015.

"Advanced Incorporating Service, Inc. by, Weimar Lopez, Client Representative"



Authorized Representative

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15 MAR -4 PM 4:06
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE DESIGNATING REGISTERED AGENT AND REGISTERED OFFICE

Pursuant to the provisions of section 605.0113, Florida Statutes, the
aforementioned company, organized under the laws of the State of
Florida, submits the following statement designating the Registered
Agent and Registered Office, in the State of Florida.

Name of the limited liability company:

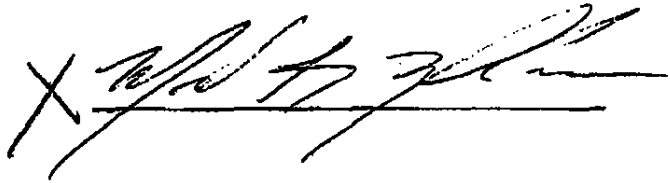
TOP HAT LV, LLC

**Name and address of the Registered Agent and Registered
Office:**

Marti Moulson

907 Woodbridge Court, Safety Harbor, FL 34695

Having been named Registered Agent and to accept Service of
Process for the aforementioned company at the designated
place in this certificate, I hereby accept the appointment and
agree to act in its capacity, I further agree, am familiar with and
accept the obligations of my position as Registered Agent as
provided for in Chapter 605, Florida Statutes.



FILED
5 MAR -4 PM 1:00
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TALLAHASSEE, FLORIDA