16000083732

(Re	equestor's Name)	
(Ad	idress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	



600284686056

04/25/16--01006--017 **139:08

160.00

Office Use Only

COVER LETTER

	legistration Section Pivision of Corporations			
SUBJECT	Manasota Holdings "LLC."			
SOBJECT		me of Limited Liabili	ty Company	
The enclos	sed Articles of Organization and	fee(s) are submitted	for filing.	
Please retu	ırn all correspondence concernir	ig this matter to the fo	ollowing:	
	Sheryl Sepessy			
		Name of	Person	
	Manaasota Holdings "LLC."			
		Firm/Co	mpany	
	7282 55TH Ave E. #110			
		Addre	ess	
	Bradenton, Florida 34203			
	manasotaholdingsfl@gmail.cor	City/State and	d Zip Code	
	E-mail address: (to	be used for future a	nnual report notifica	ntion)
For further i	information concerning this matt	er, please call:		
	Sheryl Sepessy	941 at (713-5088	
	Name of Person	Area Code	Daytime Telepho	one Number
Enclosed i	s a check for the following amou	unt:		
\$125.00 F	Filing Fee \$130.00 Filing Certificate of S	Status L Certific	0 Filing Fee & ed Copy al copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address		Street Address	

1

New Filing Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

New Filing Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassec, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liabilit	ty Company is:		
Manasota Holdings	"LLC."		
(Must end	with the words "Limited	d Liability Company	y, "L.L.C.," or "LLC,")
ARTICLE II - Address:			
The mailing address and street ad	ddress of the principal of	office of the Limited	Liability Company is:
<i>g</i>			- <u> </u>
Princip	al Office Address:		Mailing Address:
7282 55TH Ave. E.	#110	7282	2 55TH Ave.E. #110
Bradenton, FL 3420	3	Brac	denton, FL 34203
ADTICLE III Dogiotowod Age	out Designand Office	P. Doristanad Agus	-4)- C:4
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own	Registered Agent.	nt's Signature: You must designate an individual or
(The Limited Liability Company	cannot serve as its own active Florida registration	Registered Agent. on.)	
(The Limited Liability Company another business entity with an a	cannot serve as its own active Florida registration address of the registered	Registered Agent. on.)	
(The Limited Liability Company another business entity with an a	cannot serve as its own active Florida registration	Registered Agent. on.)	
(The Limited Liability Company another business entity with an a	cannot serve as its own active Florida registration address of the registered	Registered Agent. on.) d agent are:	
(The Limited Liability Company another business entity with an a	cannot serve as its own active Florida registration address of the registered Sheryl Sepessy	Registered Agent. d agent are: Name	You must designate an individual or
(The Limited Liability Company another business entity with an a	cannot serve as its own active Florida registration address of the registered Sheryl Sepessy 7282 55th Ave. E. #	Registered Agent. d agent are: Name	You must designate an individual or
(The Limited Liability Company another business entity with an a	cannot serve as its own active Florida registration address of the registered Sheryl Sepessy 7282 55th Ave. E. # Florida street address	Registered Agent. on.) d agent are: Name 110 s (P.O. Box NOT a	You must designate an individual or

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 605, F.S..

(CONTINUED)

Page 1 of 2

(Use attachment if necessary) E V: Effective date, if other than the date of filing:	Title: "AMBR" = Authorized M "MGR" = Manager	Name and Address: ember		_
MGR Greggory B. Sepessy 3604 62nd ST. E. Bradenton, fl 34208 Greggory B. Sepessy 3604 62nd ST. E. Bradenton, fl 34208 (Use attachment if necessary) E. V. Effective date, if other than the date of filing:				- -
Signature of a member or an authorized representation of a member. This document is executed in actordance with section 605, 2263 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Sheryl Sepessy Typed or printed name of signee Filing Fees: \$ 30.00 Certificate of Status (Optional)	MGR	3604 62nd ST. E.		- - -
E. V: Effective date, if other than the date of filing:	MGR	3604 62nd ST.E.		- -
EV: Effective date, if other than the date of filing:		Bradenton, fl 34208		-
EV: Effective date, if other than the date of filing:				- - -
Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Sheryl Sepessy Typed or printed name of signee Filing Fees: \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)	(Use attachment if necessar	ry)		
Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0293 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Sheryl Sepessy Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)	ective date is listed, the da of filing.)	te must be specific and cannot be more than tr	ive business days prior to or 9	
Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0293 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Sheryl Sepessy Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)	ective date is listed, the date of filing.) If the date inserted in this blument's effective date on the	ce must be specific and cannot be more than in ock does not meet the applicable statutory filing be Department of State's records.	ive business days prior to or 9	
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Sheryl Sepessy Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)	ective date is listed, the date of filing.) If the date inserted in this blument's effective date on the LE VI: Other provisions, if a	ce must be specific and cannot be more than in ock does not meet the applicable statutory filing the Department of State's records. Iny.	ive business days prior to or 9	
Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional) \$5.00 Certificate of Status (Optional)	ective date is listed, the date of filing.) If the date inserted in this blument's effective date on the LE VI: Other provisions, if a REOUIRED SIGNATURE	ce must be specific and cannot be more than in the cock does not meet the applicable statutory filing the Department of State's records. The cock does not meet the applicable statutory filing the Department of State's records.	requirements, this date will no	
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)	ective date is listed, the date of filing.) If the date inserted in this blument's effective date on the LE VI: Other provisions, if a Signature Signature Signature Signature I am awar	ck does not meet the applicable statutory filing to Department of State's records. The state of a member or an authorized representation is executed in accordance with section 605 to that any false information submitted in a document.	requirements, this date will not be the second of the seco	ot be
\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)	REQUIRED SIGNATULE Sign This docu I am awar constitute	ature of a member or an authorized regresser ment is executed in accordance with section 605 et that any false information submitted in a document at third degree felony as provided for in s.817.15 eryl Sepessy	requirements, this date will not be required a member. (1.003 (1) (b), Florida Statutes ment to the Department of Statutes 55, F.S.	ot be
	REQUIRED SIGNATUL Sign This docu I am awar constitute Sign This docu I am awar constitute	ature of a member or an authorized regresser ment is executed in accordance with section 605 e that any false information submitted in a document at third degree felony as provided for in s.817.15 eryl Sepessy Typed or printed name of signee Filing Fees:	requirements, this date will not be a member. (1993 (1) (b), Florida Statutes nept to the Department of State 55, F.S.	ot be
	rective date is listed, the date of filing.) If the date inserted in this blument's effective date on the LE VI: Other provisions, if a Sign This document a may a constitute \$125.00 Filling Fee for A \$ 30.00 Certified Copy	ature of a member or an authorized regressent is executed in accordance with section 605 ethat any false information submitted in a document at third degree felony as provided for in s.817.15 eryl Sepessy Typed or printed name of signee articles of Organization and Designation of Re(Optional)	requirements, this date will not be requirements, this date will not be requirement of a member. 5.(293 (1) (b), Florida Statutes nent to the Department of State 55, F.S.	ot be

E PH 2: 55