

L16000123441

(Requestor's Name)

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(Address)

(City/State/Zip/Phone #)

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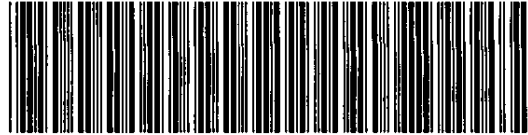
(Business Entity Name)

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COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: No Mo Mosquito, 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:

Joseph Bogdan

Name of Person

Firm/Company

13 Strong Street

Address

Wallington, NJ 07057

City/State and Zip Code

NOBUGNOBITE@Gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph Bogdan

at

(201)

460-7520

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☒ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

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

Street Address

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

**ARTICLES OF ORGANIZATION
CERTIFICATE OF FORMATION
OF
NO MO MOSQUITO, LLC**

These Articles of Organization of No Mo Mosquito, LLC (the "Company") are being executed by the undersigned for the purpose of forming a limited liability company pursuant to the Florida Limited Liability Company Act.

ARTICLE I: The name of the Company is **No Mo Mosquito, LLC.**

ARTICLE II: The mailing address and street address of the principal office of the Company is:

Principal Office Address:

13 Strong Street
Wallington, NJ 07057

Mailing Address:

13 Strong Street
Wallington, NJ 07057

ARTICLE III: The name and the Florida street address of the Company's registered agent is:

Registered Agents Inc.
3030 N. Rocky Point Dr., Suite 150A
Tampa, FL 33607
Hillsborough County

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..

Registered Agent's Signature



Bill Havre/Secretary/Registered Agents Inc.

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JUN 27 2016
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HILLSBOROUGH COUNTY
TAMPA, FL

ARTICLE IV: The name and address of each person, whose title is AMBR, are each individually authorized to manage and control the Company.

Joseph Bogdan
13 Strong Street
Wallington, NJ 07057

MaryBeth Lukie
13 Strong Street
Wallington, NJ 07057

ARTICLE V: The undersigned, an authorized person of the Company, has caused these Articles of Organization to be duly executed as of this 24th day of June, 2016.

By: Joseph Bogdan
Joseph Bogdan

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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

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DEPT OF STATE
CLERK OF COURT