

L16000188412

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

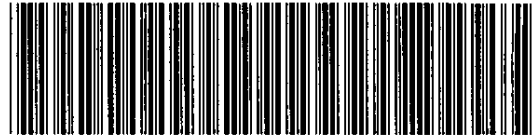
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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16 OCT 11 AM 9:33
SECRETARY OF STATE
TALLAHASSEE FLORIDA

10/12/16

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Tarpon Art Guild 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:

Patsy Renz

Name of Person

Tarpon Art Guild LLC

Firm/Company

118 E Tarpon Ave

Address

Tarpon Springs, FL 34689

City/State and Zip Code

patsy.renz@verizon.net

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

For further information concerning this matter, please call:

patsy Renz

Name of Person

at (727)

Area Code

943-7732

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 FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Tarpon Art Guild LLC
(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

118 E Tarpon Ave
Tarpon Springs
FL 34689

Mailing Address:

118 E Tarpon Ave
Tarpon Springs
Florida 34689

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Patsy Renz
Name
39650 US Hwy 19 N UNIT 1413
Florida street address (P.O. Box **NOT** acceptable)
Tarpon Springs FL 34689
City State Zip

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

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.

Patsy Renz
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

AMBR

AMBR

MGR

Name and Address:

Frank Hipp

1742 Wood Trail ST

Tarpon Springs FL 34689

Jan Causey

1216 Blackrush Dr

Tarpon Springs FL 34689

Patsy Renz

39650 US Hwy 19N Unit 140B

Tarpon Springs FL 34689

Heather Risley

2906 Oak Ct.

Tarpon Springs FL 34689

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:

Patsy Renz

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.

Patsy Renz

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)

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DEPARTMENT OF STATE
TALLAHASSEE FLORIDA

Tarpon Art Guild LLC
118 E Tarpon Ave
Tarpon Springs FL 34689

Article IV.

Title

Name and Address

MGR

Petera Semple
1412 Coburn Dr
Tarpon Springs FL 34689

MGR

Tom Wilke
1117 Ridge Dr
Palm Harbor FL 34683

MGR

Anneke Holsein
1014 Beaver Dr
Tarpon Springs FL 34689

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RECEIVED OF STATE
TALLAHASSEE FLORIDA