

L17000007389

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Ma Zy, Inc. 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:

Jeffrey A Zysek
Name of Person

Firm/Company

2408 SE 23rd Place
Address

Ocala, FL 34471
City/State and Zip Code

Jeff. Zysek@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jeff Zysek at (352) 361-7795
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)

#4012

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

January 3, 2017

JEFFREY A ZYSEK
2408 SE 23RD PLACE
OCALA, FL 34471

SUBJECT: MAZY, INC.
Ref. Number: W17000000087

We have received your document for MAZY, INC. and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

You have submitted the document and fees to form a Limited Liability Company; however your name implies that you wish to form a corporation. The name of the corporation. The name of the corporation must contain Corporation, Corp., Incorporated, Inc., Company, Co. If you wish to continue to form the corporation, you must submit "Articles of Incorporation" along with a fee of \$70.00. Once you have completed those documents, a letter would have to be submitted in order for us to refund you the money for the filing of the previous submission the of Articles of Organization.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Nadira D McClees-Sams
Regulatory Specialist II

Letter Number: 017A00000025



FLORIDA DEPARTMENT OF STATE
Division of Corporations

November 16, 2016

JEFFREY A ZYSEK
2408 SE 23RD PLACE
OCALA, FL 34471

SUBJECT: MAZY INC. LLC
Ref. Number: W16000077509

We have received your document for MAZY INC. LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the entity cannot include "INC." This word/abbreviation is readily associated with or is commonly used to denote another type of entity. Please amend your document throughout accordingly.

INC

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Nadira D McClees-Sams
Regulatory Specialist II

Letter Number: 216A00024569

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MaZy, 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:

<u>Principal Office Address:</u>	<u>Mailing Address:</u>
<u>2408 SE 23rd Pl</u>	<u>P.O. Box 5669</u>
<u>Ocala, FL 34471</u>	<u>Ocala, FL 34478</u>

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:

Jeffrey Zysek
Name
2408 SE 23rd Place
Florida street address (P.O. Box **NOT** acceptable)
Ocala FL 34471
City State Zip

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 (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

Name and Address:

Jeffrey Zysek
2408 SE 23rd Pl
OCALA FL 34471

Sueanne Mazzurco
P.O. BOX 5669
OCALA, FL 34478

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: October, 2016 (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:



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.

Jeff Zysek

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)