

# L18000005625

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP    ☐ WAIT    ☐ MAIL

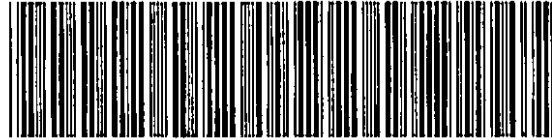
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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SECRETARY OF STATE  
TALLAHASSEE FLORIDA

N CULLIGAN

JAN 9 2018

**JAMES W. TEKAVEC**

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ATTORNEY AT LAW  
ADMITTED TO PRACTICE  
IN OHIO AND FLORIDA

38106 Third Street  
Willoughby, Ohio 44094  
TELEPHONE 440-918-6363 Ext. 101  
FAX 440-602-5126  
E-MAIL [jwtekaw@att.net](mailto:jwtekaw@att.net)

December 28, 2017

Florida Department of State  
Division of Corporations  
PO Box 6327  
Tallahassee, FL 32314

**RE: Flash 'n Thunder Entertainment, LLC.**

Dear Sir/Madam:

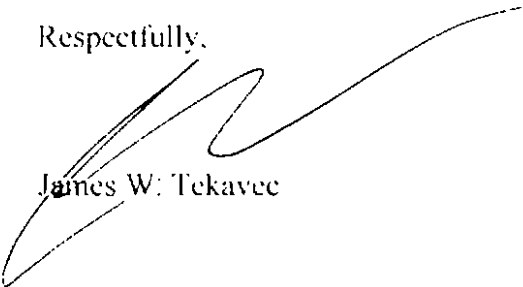
Enclosed please find my check payable to The Florida Department of State in the amount of \$130.00 which represents payment of Filing Fee and Certificate of Status.

In addition, I have enclosed executed Cover Letter and Articles of Organization for Florida Limited Liability Company for the above referenced Limited Liability Company

Please process in your usual manner and return Recorded Documents and Certificate of Status to my office in the envelope provided.

Thank you.

Respectfully,

  
James W. Tekavec

JWT:rd  
Enclosures  
cc: Jeffery Lelko

**COVER LETTER**

**TO: New Filing Section  
Division of Corporations**

**SUBJECT:** Flash 'n Thunder Entertainment, 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 Lelko

Name of Person

Firm/Company

385 N. Putnam Grove Road

Address

Oak Hill, Florida 32759

City/State and Zip Code

jefflelko@yahoo.com

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

For further information concerning this matter, please call:

Jeff Lelko

Name of Person

at ( 440 ) 226-0184

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 FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Flash 'n Thunder Entertainment, LLC.

(Must contain 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:

Mailing Address:

385 N. Putnam Grove Road  
Oak Hill  
Florida 32759

385 N. Putnam Grove Road  
Oak Hill  
Florida 32759

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 Lelko  
Name  
385 N. Putnam Grove Road  
Florida street address (P.O. Box ~~NOT~~ acceptable)  
Oak Hill Florida 32759  
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.

X [Signature]  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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**ARTICLE IV-**

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

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

**Name and Address:**

AMBR

Jeffrey Lelko  
385 N. Putnam Road  
Oak Hill, Florida 32759

(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:**



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.

Jeffrey Lelko

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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