

L1800072037

(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

M. MOON

MAR 22 2018



300310852413

FILED
18 MAR 21 PM 12:37
SECRETARY
FALL LAKE, IL

2018 MAR 21 PM 4:16
FALL LAKE, IL

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 126800 81514A

AUTHORIZATION :

[Handwritten Signature]

COST LIMIT : \$ 155.00

ORDER DATE : March 21, 2018

ORDER TIME : 2:51 PM

ORDER NO. : 126800-005

CUSTOMER NO: 81514A

FILED
18 MAR 21 PM 12:37
SECRETARY
TALLAHASSEE, FL

DOMESTIC FILING

NAME: GRECO'S OF TITUSVILLE, LLC

EFFECTIVE DATE:

____ ARTICLES OF INCORPORATION
____ CERTIFICATE OF LIMITED PARTNERSHIP
XX _____ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX _____ CERTIFIED COPY
____ PLAIN STAMPED COPY
____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner - EXT.

EXAMINER'S INITIALS: _____

**ARTICLES OF ORGANIZATION
FOR FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I – Name:

The Name of the Limited Liability Company is: GRECO'S OF TITUSVILLE, LLC

ARTICLE II – Address:

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

a: Mailing Address: 3690 Oakhill Drive, Titusville, FL 32780

b: Street Address: 3690 Oakhill Drive, Titusville, FL 32780

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

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

John M. Houvardas

Name

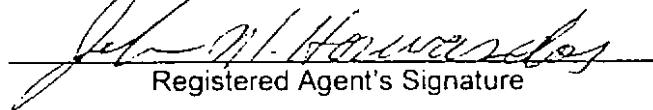
3690 Oakhill Drive

Florida street address (Post Office Box **NOT** acceptable)

Titusville, Florida 32780

City, State and 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

ARTICLE IV – Management (Check applicable box)

☒ The Limited Liability Company is to be managed by one manager or
managers and is, therefore, a manager – managed company.

☐ The Limited Liability Company is to be managed by one member or
members and is, therefore, member - managed company.

FILED
18 MAR 21 PM 12:37
SECRETARY OF STATE
TALLAHASSEE, FLA.

ARTICLE V --

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:

MGR

John M. Houvardas
3690 Oakhill Drive
Titusville, Florida 32780

AMBR

Michael J. Houvardas
3690 Oakhill Drive
Titusville, Florida 32780

AMBR

Eleni Houvardas
3690 Oakhill Drive
Titusville, Florida 32780

AMBR

Stamatina G. Katogyritis
3690 Oakhill Drive
Titusville, Florida 32780

ARTICLE VI: 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.)

ARTICLE VI: Other provisions, if any.



Signature of a member or an authorized representative of a member

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Victor J. Troiano, Authorized Representative

Typed or printed name of signee

FILED
18 MAR 21 PM 12:37
TALLAHASSEE, FLA