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FLORIDA DEPARTMENT OF STATE Division of Corporations

November 12, 2019

JUDY L. CIASCA 5983 NEWBURY CIRCLE MELBOURNE, FL 2940

SUBJECT: JUDY'S SOUTHERN HOSPITALITY, LLC

Ref. Number: W19000099195

We have received your document for JUDY'S SOUTHERN HOSPITALITY, LLC. However, upon receipt of your document no check was enclosed. Please send a check or money order payable to the Department of State for \$130.00. Your document will be retained in our pending file. Please return a copy of this letter to ensure that your check is properly credited.

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.

Neysa Culligan Regulatory Specialist II

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Letter Number: 719A00023236

COVER LETTER

	w ruing Section vision of Corporations	
aun in an	Judy's Southern Hospita	ality, LLC
SUBJECT:		of Limited Liability Company
The enclose	d Articles of Organization and fee	e(s) are submitted for filing.
Please return	n all correspondence concerning th	nis matter to the following:
	Judy L. Ciasca	
•		Name of Person
	Judy's Southern Hospita	ality, LLC
•		Firm/Company
	5983 Newbury Circle	
•		Address
	Melbourne, Florida 329	940
	judyciasca@gmail.com	City/State and Zip Code
_	E-mail address: (to be	used for future annual report notification)
For further in	formation concerning this matter,	please call:
	Ronald Strait	at (321) 604–8364
_	Name of Person	Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:	
\$12 5.00 Fil	ing Fee \$130.00 Filing Fee Certificate of Statu	
	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

AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must contain the words "Limited Liab	pility Company, "L.L.C.," or "LLC.")
CLE II - Address:	
ailing address and street address of the principal office	e of the Limited Liability Company is:
Principal Office Address:	Mailing Address
	Mailing Address:

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

Name

5983 Newbury Circle

Florida street address (P.O. Box NOT acceptable)

Melbourne

Florida

City

State

Zip

SECRETARY OF STATE

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)

Title: "AMBR" = Authorized Member "MGR" = Manager MGR Judy L. Ciasca 5983 Newbury Circle Melbourne, Florida 32940 AMBR Ronald Strait 5983 Newbury Circle Melbourne, Florida 32940 COUNTY OF THE PROPERTY OF THE PR

(Use attachment if necessary)

ARTICLE IV-

ARTICLE V: Effective date, if other than the date of filing: 10/23/2019 (OPTIONAL)	
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(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.)

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

<u>Note:</u> 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, i	fanv.			
				·	

REOUIRED 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.

Ronald Strait

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)