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(Requestor's Name)	
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(Business Entity Name)	
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(Document Number)	
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	ew Filing Section vision of Corporations	•	
SUBJECT	Slice of 30A, LLC		
		mited Liability Company	
The enclose	ed Articles of Organization and fee(s) ar	re submitted for filing.	
Please retu	m all correspondence concerning this m	atter to the following:	
	Jason Salinas		
		Name of Person	
	Slice of 30A, LLC		
		Firm/Company	
	456 Linkside PI E		
		Address	
	Miramar Beach, FL 32550		
j	(iason@jcsgourmet.com	City/State and Zip Code	
-	E-mail address: (to be used	l for future annual report notification)
For further in	formation concerning this matter, pleas	e call:	
	Jason Salinas 8 at (50 687-2810)	
	Name of Person A	Area Code Daytime Telephone N	lumber
Enclosed is	a check for the following amount:		
√ \$125.00 Fi	ling Fee \$130.00 Filing Fee & Certificate of Status	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy additional copy is enclosed)
	<u>Mailing Address</u> New Filing Section Division of Corporations P.O. Box 6327 Taliahassee, FL 32314	<u>Street Address</u> New Filing Section Division of Corporation Clifton Building 2661 Executive Center (Tallahassee, FL 32301	

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

(Must contain the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
CLE II - Address: iling address and street address of the principal office	e of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
456 Linkside Pl E	456 Linkside Pl E

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:

Jason Salinas		
	Name	
456 Linkside Pl E		
Florida street address	s (P.O. Box <u>NOT</u> as	cceptable)
Miramar Beach	FL	32550
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..

gent's Signature (REQUIRED) RUEIN

(CONTINUED)

ARTICLE IV-

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

MGR" = Manager		
MBR	Jason Salinas	
	456 Linkside PI E	
	Miramar Beach, FL 32550	
MBR	Julie Salinas	
	456 Linkside PI E	
	Miramar Beach, FL 32550	
<u>.</u>		

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.)

<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, if any.

<u>REOUIREI</u>	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. Jason Salinas
	Typed or printed name of signee

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)