

# L21000082011

(Requestor's Name)

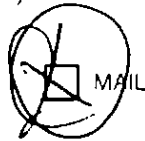
(Address)

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(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT



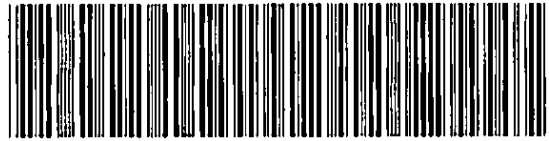
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FL

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FLORIDA DEPARTMENT OF STATE  
Division of Corporations

February 24, 2021

STACY SMALL  
SMITH THOMPSON SHAW  
3520 THOMASVILLE ROAD-4TH FL  
TALLAHASSEE, FL 32309

SUBJECT: CAST IRON SKILLET INVESTMENTS, LLC  
Ref. Number: W21000025876

We have received your document for CAST IRON SKILLET INVESTMENTS, LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$125.00.

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 III

Letter Number: 921A00004090

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SECRETARY OF STATE  
TALLAHASSEE, FL

**ARTICLES OF ORGANIZATION  
OF  
CAST IRON SKILLET INVESTMENTS, LLC**

\*\*\*\*\*

The undersigned, pursuant to the provisions of Chapter 605 of the Florida Statutes (the "Florida Revised Limited Liability Company Act"), for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

1. **NAME.**

The name of the Limited Liability Company is **CAST IRON SKILLET INVESTMENTS, LLC** (hereinafter referred to as the "Company").

2. **PERIOD OF DURATION.**

The period of duration of the Company shall be perpetual, unless it is dissolved as provided in the Florida Limited Liability Act or the written Operating Agreement to be executed by all of the Members of the Company.

3. **PURPOSE.**

To engage in any and all other businesses and activities permitted by the laws of the State of Florida. The Company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.

4. **MAILING ADDRESS OF BUSINESS.**

The mailing address of the business in Florida for the Company is **1150 Bell Road, Havana, Florida 32333**. Such address may be changed from time to time as provided in the Operating Agreement.

5. **ADDRESS OF PLACE OF BUSINESS.**

The address of the place of business is **1150 Bell Road, Havana, Florida 32333**. Such address may be changed from time to time as provided in the Operating Agreement.

6. **REGISTERED AGENT.**

The initial registered agent in Florida for the Company is: **Lynn T. Hagood, Sr.**, and the initial, registered office is located at **1150 Bell Road, Havana, Florida 32333.**

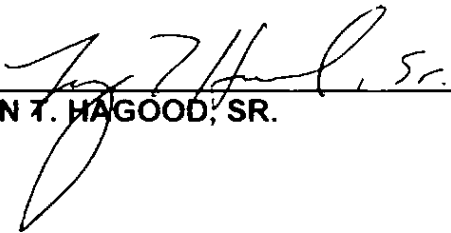
7. **MANAGEMENT.**

The names and address of the persons authorized to manage and control the Limited Liability Company are as follows:

**Hallie H. Hagood  
1150 Bell Road  
Havana, Florida 32333**

**Lynn T. Hagood, Sr.  
1150 Bell Road  
Havana, Florida 32333**

**EXECUTED** at Havana, Gadsden County, Florida this 19<sup>th</sup> day of February, 2021.

  
\_\_\_\_\_  
**LYNN T. HAGOOD, SR.**

**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT WITH WHOM PROCESS MAY BE SERVED.**

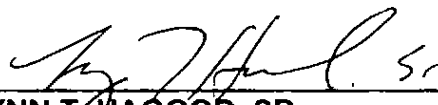
Pursuant to the provisions of Section 605 Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the limited liability company is **CAST IRON SKILLET INVESTMENTS, LLC.**
2. The name of the registered agent and office address is: **Lynn T. Hagood, Sr., 1150 Bell Road, Havana, Florida 32333.**

**ACKNOWLEDGEMENT**

Having been named to accept service of process for the above limited liability company, at the place designated in this certificate, I hereby accept to act in this capacity and agree to comply with the provision of said Act relative to being available at said location.

**Dated February 19, 2021.**

  
\_\_\_\_\_  
**LYNN T. HAGOOD, SR.**

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