

L21000104583

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

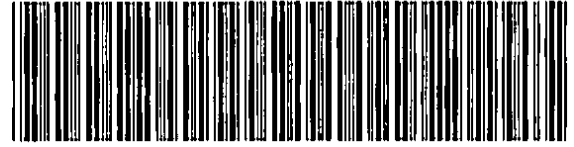
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000358809620

02/01/21--01039--029 **160.00

FILED
2021 APR 1 AM 9:18



719 Garden Street • Titusville, FL 32796 • Phone: 321-269-1511 • Fax: 321-264-7676

JERRY W. ALLENDER, ESQ.
jallerder@allenderlaw.com

STEVEN C. ALLENDER, ESQ.
sallerder@allenderlaw.com

January 27, 2021

Registration Section
Division of Corporations
P. O. Box 6327
Tallahassee, FL 32314

2021 APR - 1 AM 9:18
FILE

RE: ARISTOMACHE HOLDINGS, LLC

Dear Sir/Madam:

I enclose Articles of Organization, Certificate Designating Place of Business or Domicile for Service of Process Within this State, Naming Agent Upon Whom Process may be Served on the above named limited liability corporation. Also enclosed is my check to cover the following costs:


Filing Fee for Articles and Designation of Registered Agent	\$125.00
Certified copy	30.00
Certificate of Status	<u>5.00</u>
TOTAL	\$160.00

Please return the certified copy to the undersigned in the enclosed pre-paid envelope.

Please return the Certificate of Status to the undersigned in the enclosed pre-paid envelope.

Very truly yours.

ALLENDER & ALLENDER, P.A.



Jerry W. Allender

JWA:jg
Enclosures

ARTICLES OF ORGANIZATION
OF
ARISTOMACHE HOLDINGS, LLC

FILED
2021 APR -1 AM 9:18

The undersigned subscriber to these Articles of Organization, being a natural person competent to contract, hereby forms a limited liability company under the laws of the State of Florida.

ARTICLE I.
NAME

The name of this limited liability company is: **ARISTOMACHE HOLDINGS, LLC.**

ARTICLE II.
TERM OF EXISTENCE

The term of existence of this corporation shall be perpetual.

ARTICLE III.
ADDRESS OF PRINCIPAL OFFICE

The address of the principal office of this limited liability company is **719 Garden Street, Titusville, Florida 32796** and the mailing address is **P. O. Box 1629, Titusville, Florida 32781-1629.**

ARTICLE IV.
INITIAL REGISTERED OFFICE AND AGENT

The street address of the initial registered office of this limited liability company is **719 Garden Street, Titusville, Florida 32796**, and the initial registered agent of this limited liability company at that address is **NICHOLAS ILTSOPOULOS.**

ARTICLE V.
ADDITIONAL MEMBERS

The members shall have the right to admit additional members to the limited liability company on terms and conditions agreed upon by the members.

ARTICLE VI.
CONTINUATION OF BUSINESS

The remaining members of the limited liability company may continue the business upon the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence

of any other event which terminates the continued membership of a member in the limited liability company.

ARTICLE VII
MANAGING MEMBERS

The name and post office address of the managing members of these Articles of Organization are:

Title:

Name/Address:

AMBR

**Nicholas Iltsopoulos
719 Garden Street
Titusville, FL 32796**

ARTICLE VII

These articles of organization may be amended in the manner provided by law. Every amendment shall be approved by the managing members and approved at a members' meeting by a majority of the members, unless all the members sign a written statement manifesting their intention that a certain amendment of these Articles of Organization be made.

IN WITNESS WHEREOF, we have hereunto set our hands and seals this 26 day of January, 2021.



NICHOLAS ILTSOPOULOS

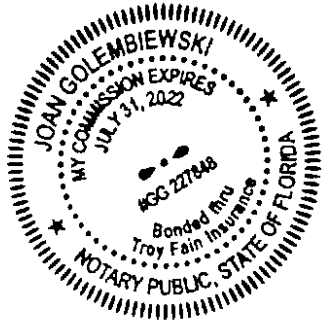
STATE OF FLORIDA
COUNTY OF BREVARD

BEFORE ME, the undersigned authority, by means of () physical presence or () online notarization, personally appeared **NICHOLAS ILTSOPOULOS**, to me well known and known to me to be the person described in and who signed the foregoing Articles of Organization, and who acknowledged before me under oath that he signed the same freely and voluntarily for the uses and purposes therein expressed, and who is personally known to me or who has produced _____ as identification.

WITNESS my hand and official seal at Titusville, Brevard County, Florida this 26 day
of January, 2021.

Joan Golubiewski

Notary Public, State of Florida
My Commission Expires:



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

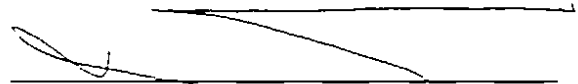
In pursuance of Chapter 48.091, Florida Statutes, the following is submitted in compliance with said Act.

FIRST: That **ARISTOMACHE HOLDINGS, LLC**, desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Organization at 719 Garden Street, Titusville, County of Brevard, State of Florida has named **NICHOLAS ILTSOPOULOS, 719 Garden Street, Titusville, Florida 32796**, as its agent to accept service of process within the state.

ACKNOWLEDGMENT

Having been named to accept service of process for the above-stated limited liability company, and place designated in the Certificate, I hereby accept to act in this capacity, and agree to comply with the provisions of said Act relative to keeping open said office.

SIGNED this 26 day of January 2021.



NICHOLAS ILTSOPOULOS
Registered Agent