L21000 111039

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(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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03/17/21--01007--029 **125.00

2021 MAR 17 AM ID: 21
SECRETARY OF STATE
TALLATIANSEE, FL

21 MAR 17 PM 2: 12

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Lorenzen Port Richey I	Holdings, LL	C		
				Art of Inc. File
				LTD Partnership File
				Foreign Corp. File
				L.C. File
		ı:		Fictitious Name File
				Trade/Service Mark
				Merger File
				Art, of Amend, File
				RA Resignation
				Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
		ľ		Photo Copy
				Certificate of Good Standing
		ļ		Certificate of Status
				Certificate of Fictitious Name
				Corp Record Search
		ı		Officer Search
				Fictitious Search
Signature	<u> </u>			Fictitious Owner Search
Signature			_	Vehicle Search
	- 			Driving Record
Requested by: SETH	02/17/21			UCC 1 or 3 File
	$\frac{03/17/21}{Date}$	Time		UCC 11 Search
Name	Date	THIC		UCC 11 Retrieval
Walk-In	Will Pick Up			Courier

COVER LETTER

	New Filing Sect Division of Cor					
CUBIEC		ort Richey Holdings,	LLC			
SUBJEC	1:	Name	of Limite	d Liabilit	y Company	
The enclo	sed Articles of	Organization and fee	(s) are su	bmitted	for filing.	
Please re	turn all correspo	ndence concerning t	his matter	to the fo	ollowing:	
	Nectaria M. S	Scrivanos				
		· .,	1	Name of	Person	
	Lorensen Por	t Richey Holdings L	LC			
				Firm/Cor	npany	
	3 Pluff Ave.	N.				
	<u></u>			Addre	ess	
	Reading, MA	01864				
	nectaria@scri	vanos.com	City	State and	1 Zip Code	 -
	E	E-mail address: (to be	e used for	future a	nnual report notificati	on)
For furthe	r information co	ncerning this matter,	please ca	ıll:		
	George G. Pa	ppas	727 at (447-4999	
	Nam	e of Person	_ \		Daytime Telephone	e Number
Enclosed	l is a check for t	he following amount	:			
	00 Filing Fee	□\$130.00 Filing Certificate of State	Fee &	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisi P.O. E	ng Address Filing Section on of Corporations Box 6327 hassee, FL 32314			Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stre Tallahassee, FL 3230	nssee ct, Suite 810

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2021 MAR 17 AM 10: 22

ARTICLE I - Name:

The name of the Limited Liability Company is:

SECRETARY OF STATE TALLAHASSEE, FL

RTICLE II - Address:				
e mailing address and s	street address of the principal o	ffice of the Limited	Liability Company is:	
<u>ī</u>	Principal Office Address:		Mailing Address:	
3 Pluff Ave. N	١.	same	as principal	
Reading, MA	01864			
				
TTCLV III - Dogistor	red Agent Registered Office	& Registered Agen	t's Signature:	
RTICLE III - Register	red Agent, Registered Office,	& Registered Agen	t's Signature:	بمامي
he Limited Liability Co	ompany cannot serve as its own	Registered Agent.	t's Signature: / ou must designate an individu	al or
he Limited Liability Co	ompany cannot serve as its own	Registered Agent.	t's Signature: You must designate an individu	al or
he Limited Liability Co	red Agent, Registered Office, Ompany cannot serve as its own vith an active Florida registratio	Registered Agent.	t's Signature: /ou must designate an individu	al or
he Limited Liability Co other business entity w	ompany cannot serve as its own with an active Florida registration	Registered Agent. \ on.)	t's Signature: /ou must designate an individu	al or
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he Limited Liability Co other business entity w	ompany cannot serve as its own with an active Florida registration a street address of the registered	Registered Agent. \ on.)	t's Signature: /ou must designate an individu	al or
he Limited Liability Co other business entity w	ompany cannot serve as its own with an active Florida registration	Registered Agent. \ on.)	t's Signature: / ou must designate an individu	al or
he Limited Liability Co other business entity w	ompany cannot serve as its own with an active Florida registration a street address of the registered	Registered Agent. Yon.) d agent are: Name	t's Signature: /ou must designate an individu	al or
he Limited Liability Co other business entity w	ompany cannot serve as its own with an active Florida registration a street address of the registered George G. Pappas	Registered Agent. Yon.) d agent are: Name , Suite 200	ou must designate an individu	al or
he Limited Liability Co other business entity w	ompany cannot serve as its own with an active Florida registration a street address of the registered George G. Pappas 1822 N. Belcher Rd.	Registered Agent. Yon.) d agent are: Name , Suite 200	ou must designate an individu	al or
he Limited Liability Co other business entity w	ompany cannot serve as its own with an active Florida registration a street address of the registered George G. Pappas 1822 N. Belcher Rd. Florida street address	Registered Agent. Yon.) d agent are: Name , Suite 200 ss (P.O. Box NOT ac	ou must designate an individu	al or
he Limited Liability Conther business entity we name and the Florida	ompany cannot serve as its own with an active Florida registration a street address of the registered George G. Pappas 1822 N. Belcher Rd. Florida street address Clearwater	Name , Suite 200 ss (P.O. Box NOT as	cceptable) 34765 Zip	

(CONTINUED)

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)