

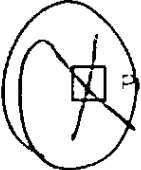
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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



PICK-UP

WAIT

MAIL

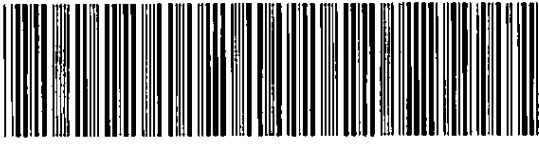
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer  
Pick up at 3:00  
Call when ready  
(850) 597-0234

Office Use Only



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2021 MAR 24 AM 10:11  
FBI

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2021 MAR 23 PM 4:34

COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: Matthew G. Monti, LLC.  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Matthew G Monti  
Name of Person

Matthew G Monti, LLC  
Firm/Company

701 S. Madison Ave. #321  
Address

Clearwater, FL 33756  
City/State and Zip Code

matt.monti@hotmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mary Giraan at (850) 5970234  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address  
New Filing Section Division  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Matthew G Monti LLC  
(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address: Mailing Address:  
701 S. N. Madison Ave #321 701 S. N. Madison Ave #321  
Marietta, FL 33756 Marietta, FL 33756

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:

Matthew G Monti  
Name  
701 S. N. Madison Ave #321  
Florida street address (P.O. Box NOT acceptable)  
Marietta FL 33756  
City State Zip

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FILED

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.

Matthew G Monti  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

~~AMBR~~ AMBR

Matthew G. Monti  
701 S. Madison Ave #321  
Clearwater, FL 33756

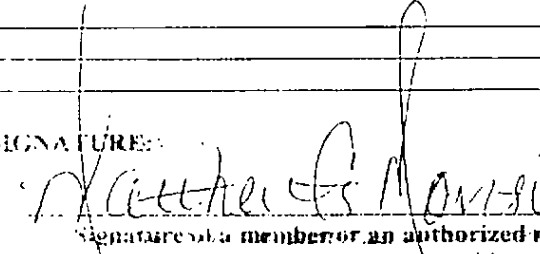
(Use attachment if necessary)

ARTICLE V: Effective date: [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.)

Note: If the date listed does not meet the appropriate statutory filing requirements, the date will not be filed and the document will be filed on the date of the Department of State's records.

ARTICLE VI: Other provisions, if any: \_\_\_\_\_

REQUIRED 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.

Matthew G. Monti  
Type or printed name of signee

Filing Fees:

1.50 (initial filing fee) + 1.00 (annual fee) + 1.00 (Organization and Designation of Registered Agent)