

L210000128184

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

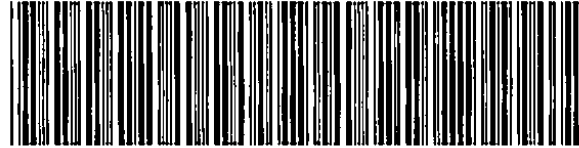
(Document Number)

1 Copies _____ Certificates of Status _____

al Instructions to Filing Officer:

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02/24/21--01020--009 **125.00

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TALLAHASSEE, FL

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: Gator Boss Gourmet Foods, 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:

Joseph S. Mitcham

Name of Person

Gator Boss Gourmet Foods, LLC

Firm/Company

180 Tulsa Ave.

Address

Spring Hill, Florida 34606

City/State and Zip Code

joethcooksh@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph Mithcham

727

777-2156

at (_____) _____

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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

TICLE I - Name:

name of the Limited Liability Company is:

Gator Boss Gourmet Foods, LLC

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

TICLE II - Address:

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

Principal Office Address:

Mailing Address:

2850 Kingswood Circle
Brooksville, Florida 34604

2850 Kingswood Circle
Brooksville, Florida 34604

TICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

e Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or
ther business entity with an active Florida registration.)

name and the Florida street address of the registered agent are:

Joseph S. Mitcham

Name

180 Tulsa Ave.

Florida street address (P.O. Box **NOT** acceptable)

Spring Hill

Florida

34606

City

State

Zip

ing been named as registered agent and to accept service of process for the above stated limited liability company at the
designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I
or agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I
miliar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

MGR

Janice French
2850 Kingswood Circle
Brooksville, FL 34604

(Use attachment if necessary)

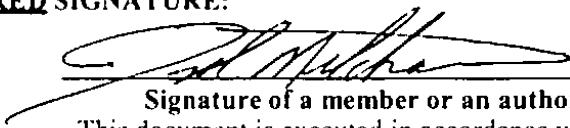
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

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.)

Note: 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.

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.

Joseph S. Mitcham

Typed or printed name of signee

Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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