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DELCHIASSES - AP

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CORPORATION SERVICE COMPANY 1201 Hays Street
Tallhassee, FL 32301
Phone: 850-558-1500

Pnone: 850-558-1500
ACCOUNT NO. : 12000000195
REFERENCE: 825309 7901254
AUTHORIZATION :
COST LIMIT: 75 160.00 MAN
ORDER DATE : May 21, 2021
ORDER TIME : 12:58 PM
ORDER NO. : 825309-005
CUSTOMER NO: 7901254
DOMESTIC FILING
NAME: LARDEBC ENTERPRISES LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION ;
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XXCERTIFIED COPYPLAIN STAMPED COPY
XX CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Eyliena Baker - EXT.
EXAMINER'S INITIALS:

COVER LETTER

	New Filing So Division of Co			
SHRIFC		C ENTERPRISES LLC		
SOBJEC	·	Name of Lin	nited Liability Company	
The enclo	sed Articles o	f Organization and fee(s) ar	e submitted for filing.	
Please reti	ım all corresp	ondence concerning this ma	atter to the following:	
	LAWRENC	CE W. CATENA		
			Name of Person	
			Firm/Company	
	350 SOUTI	I COLLIER BOULEVARE	D, UNIT 1002	
			Address	
	MARCO IS	LAND, FL 34145		÷
	smooth747@		ity/State and Zip Code	-
•		E-mail address: (to be used	for future annual report notificati	ion)
For further is	nformation co	ncerning this matter, please	call:	
	-	Akscirad, Esq. 97	:-:	
			rea Code Daytime Telephon	
Enclosed is	a check for t	he 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)
		g Address	Street Address New Filing Section Di	vision

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

LARDEBC ENTERP	RISES LLC			
(Must conat	in the words "Limited	Liability Compar	ıy, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street add	dress of the principal	office of the Limi	red Liability Company is:	
<u>Principa</u>	l Office Address:		Mailing Address:	
c/o LAWRENCE W.	CATENA	c <i>i</i>	c/o LAWRENCE W. CATENA	
350 South Collier Bou		3.	350 South Collier Boulevard, Unit 1002	
Marco Island, FL 3414	45	<u>N</u>	Marco Island, FL 34145	
	ddress of the registered	on.) d agent are:	I. You must designate an individual or	
another business entity with an ac The name and the Florida street ad	-	on.) d agent are:		
	ddress of the registered	on.) d agent are: ATENA Name		
	Idress of the registered LAWRENCE W. CA	on.) d agent arc: <u>ATENA</u> Name Dulevard, Unit 100	02	
	LAWRENCE W. Co	on.) d agent arc: <u>ATENA</u> Name Dulevard, Unit 100	02	
	LAWRENCE W. CA 350 South Collier Bo Florida street addres	on.) d agent arc: ATENA Name oulevard, Unit 100 s (P.O. Box NOT	02 acceptable)	

(CONTINUED)

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	LAWRENCE W. CATENA 350 South Collier Boulevard, Unit 1002 Marco Island, Florida 34145	
		- - -
		- - -
(Use attachment if necessary)		
f an effective date is listed, the date must be special date of filing.) Note: If the date inserted in this block does not reduce document's effective date on the Department	e of filing:	-
RTICLE VI: Other provisions, if any,		
This document is executed any false	ember or an authorized representative of a member. ted in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State	
LAWRENCE W	c felony as provided for in s.817.155, F.S. CATENA Typed or printed name of signee	
	Filing Fees:	•
\$ 30.00 Certified Copy (Optional)	ganization and Designation of Registered Agent	•
S 5.00 Certificate of Status (Option	al)	-y-*