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## **COVER LETTER**

TO:	New Filing Section Division of Corporations	
ėub ir i	unda Richichi, LLC	
SUBJEC	Name of Limited Liability Company	—— <b>←</b> ~3
		<b>021</b>
The enc	osed Articles of Organization and fee(s) are submitted for filing.	2021 JUL -2
Please re	eturn all correspondence concerning this matter to the following:	i rè
	Linda Richichi	. <u>වැ</u> 
	Name of Person	<i>,</i> , , , , ,
	Linda Richichi, LLC	
	988 Blvd. of the Arts # 915	
	Address	
	Sarasota, FL 34236	
	City/State and Zip Code	
	Linda e Richichi Art. com	<u> </u>
	E-mail address: (to be used for future annual report notification)	
For furthe	er information concerning this matter, please call:	
	Name of Person Area Code Daytime Telephone Number	ber
Enclose	d is a check for the following amount:	
□\$125	Certificate of Status Certified Copy Co (additional copy is enclosed) Ce	\$160,00 Filing Fee, entificate of Status & entified Copy itional copy is enclosed)
	Mailing Address Street Address	
	New Filing Section New Filing Section Division Division of Corporations The Centre of Tallahassee	
	Division of Corporations The Centre of Tallahassee P.O. Box 6327 2415 N. Monroe Street, Suit	e 810
	Tallahassee, FL 32314 Tallahassee, FL 32303	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:
Linda Richichi, 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:
988 Blvd. of the Ails #915 988 Blvd. of the Arts #915 Sarasota, FL 34236 Sarasota, FL 34236
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:    Mark Western
GRS Blvd. OF the Arts #915  Florida street address (P.O. Box NOT acceptable)
Sarascita FL 34.336 City State Zip
· · · · · · · · · · · · · · · · · · ·
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  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		, , , , , , , , , , , , , , , ,	,		
$\underline{MGR}$	_	Linda Richich	( Arts #1915	<del> </del>	
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Filing Fees:

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

8 30.00 Certified Copy (Optional)

8 5.00 Certificate of Status (Optional)