

L21000324923

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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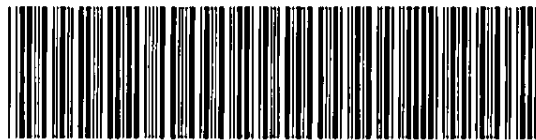
(Business Entity Name)

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

ACCOUNT NO. : I20000000195

REFERENCE : 906660 4809065

AUTHORIZATION :



COST LIMIT : \$125.00

ORDER DATE : July 15, 2021

ORDER TIME : 10:32 AM

ORDER NO. : 906660-005

CUSTOMER NO: 4809065

DOMESTIC FILING

NAME: THEOBALD LACHAPELLE LLC

EFFECTIVE DATE:

_____ ARTICLES OF INCORPORATION
_____ CERTIFICATE OF LIMITED PARTNERSHIP
XX _____ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland - EXT.

EXAMINER'S INITIALS: _____

THEOBALD LACHAPELLE LLC

ARTICLES OF ORGANIZATION

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2021 JUL 15 PM 12:42
SECRETARY OF STATE
TALLAHASSEE, FL

The undersigned, being authorized to execute and file these Articles, hereby forms a limited liability company pursuant to the laws of Florida and certifies that:

Article I – Name

The name of the limited liability company (the “Company”) is:

Theobald LaChapelle LLC

Article II – Address

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


9701 Collins Ave, Unit 704
Bal Harbour, Florida 33154

Article III – Registered Agent, Registered Office, & Registered Agent’s Signature.

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

Stephen Patrick Theobald
9701 Collins Ave, Unit 704
Bal Harbour, Florida 33154

Having been named 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.


Stephen Patrick Theobald

Article IV

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

<u>Title:</u>	<u>Name and Address</u>
MGR	Robin LaChapelle 9701 Collins Ave, Unit 704 Bal Harbour, Florida 33154
MGR	Stephen Patrick Theobald 9701 Collins Ave, Unit 704 Bal Harbour, Florida 33154

Article V

Effective date of these Articles is the date of filing.

Required Signature:



Stephen Patrick Theobald

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.

2021 JUL 15 PM12:42
SECRETARY OF STATE
TALLAHASSEE FL

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