# Electronic Articles of Organization For Florida Limited Liability Company

L21000325719 FILED 8:00 AM July 16, 2021 Sec. Of State bjhayes

# **Article I**

The name of the Limited Liability Company is: ON A MONDAY LLC

### **Article II**

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

53 BROAD AVE S NAPLES, FL. 34102

The mailing address of the Limited Liability Company is:

500 W 30TH ST APT 26F NEW YORK, NY. 10001

## **Article III**

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

THOMAS E PARENT 53 BROAD AVE S NAPLES, FL. 34102

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.

Registered Agent Signature: THOMAS PARENT

## **Article IV**

The name and address of person(s) authorized to manage LLC:

Title: MGR DYLAN M PARENT 500 W 30TH ST 26F NEW YORK, NY. 10001

Title: MGR JOHN R YOST 204 W 10TH ST 12 NEW YORK, NY. 10014 L21000325719 FILED 8:00 AM July 16, 2021 Sec. Of State bjhayes

#### Article V

The effective date for this Limited Liability Company shall be:

07/16/2021

Signature of member or an authorized representative

Electronic Signature: DYLAN MARIE PARENT

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.