

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H21000276811 3)))



H210002768113ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (8

: (850)617-6381

From:

Account Name : THE LYONS LAW GROUP, P.A.

Account Number : I2020000085 Phone : (352)515-0101

Fax Number : (352)616-0055

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: GMAGDALENE 46 GYChOD. Com

FLORIDA LIMITED LIABILITY CO. FL CALZONES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

(FAX)352 816 0055

P.001/004

850-617-6381

7/21/2021 11:49:49 AM PAGE 1/001 Fax Server



July 21, 2021

FLORIDA DEPARTMENT OF STATE Division of Corporations

THE LYONS LAW GROUP P.A

SUBJECT: PL CALZONES, LLC

REF: W21000103336

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Due to transmission problems, your faxed document or coversheet is illegible or incomplete. Please refax the document and cover sheet to this office for processing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Shareta Backey Regulatory Specialist II FAX Aud. #: H21000276811 Letter Number: 421A00016889 H210002768113

ARTICLES OF ORGANIZATION FOR FL CALZONES, LLC

ARTICLE I - NAME

The name of the Limited Liability Company is FL CALZONES, 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:
223 S. Howard Avenue	26460 Wakefield Drive
Tampa, Florida 33606	Brooksville, Florida 34602

ARTICLE III - REGISTERED AGENT

The name and the Florida street address of the Registered Agent is Michael Foote, 223 South Howard Avenue, Tampa, Florida 33606.

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, Florida Statutes.

Michael Foote, Registered Agent

H210002768113

ARTICLE IV - MANAGEMENT

The names and addresses of each person authorized to manage and control the Limited Liability Company are as follows:

Name and Address:	Title
Michael Foote 26460 Wakefield Drive Brooksville, Florida 34602	Member
Magdalene Gomes Foote 26460 Wakefield Drive Brooksville, Florida 34602	Member

In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 817.155, F.S.

Michael Foote, Member

Mardalene Gomes Foote, Member

21 JUL 23 AM 11: 35

H210002768113