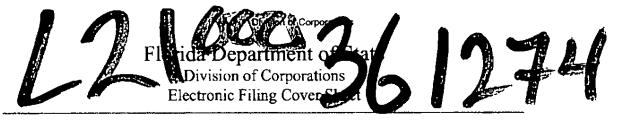
8/11/2021



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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : LEGALZOOM.COM INC.

Account Number : I20010000062 Phone : (323)962-8600

Fax Number : (323)962-3889

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

Email	Address:		

# FLORIDA LIMITED LIABILITY CO.

# Cowtown Performance Horses LLC

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$155.00

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Corporate Filing Menu

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1 Page: 3 of 6

## COVER LETTER

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eunice:		Performance Horses	LLC					
SUBJECT	ı: <u></u>	Nanx	of Lim	ited Liab	ility Compry			
The enclos	sed Articles of	Organization and fe	ee(s) are	submitte	ed for filing.			
Please retu	ım all correspo	ondence concerning	this ma	tter to the	following:			
	Cheyenne M	loselev					<u> </u>	282
		<u> </u>		Name e	of <b>Pason</b>		<u></u>	<u>~</u>
	Legalzoom.c	com, Inc.					AFFECT ASSET	2021 AUG 11 PM 3: 1
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		ngAddress			StreetAddress			
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	Division of Corporations P.O. Box 6327				Division of Corporati Clifton Building	RIOIS		
	Tallahassee, FL 32314				2661 Executive Cent	er Circle		

Tallahassee, FL 32301

ARTICLE I - Name:

To: 18506176381

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Cowtown Performance Horses LLC	
(Must conatin 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:

6517 SE 33rd Tree				124 ¢
Okeechobee, Florid				
				19.5
ARTICLE III - Registered A The Limited Liability Compar mother business entity with a	iy cannot serve as its o i active Florida registr	own Registered Agent. You ation.)		SSEE, FILES
The name and the Florida stree	t address of the regist	ered agent are:		52
	United States Co	rporation Agents, Inc.		₩.
		Name		
	5575 S. Semoran	Blvd. Suite 36		
	Florida street add	dress (P.O. Box <u>NOT</u> acce	ptable)	
	Orlando	Florida	32822	

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..

State

Zip

Cly

Registered Agent's Signature (RRQURED)

(CONTINUED)

To: 18506176381 Page: 5 of 6 2021-08-11 07:41:30 PDT LegalZoom.com, Inc. From: Ashley Harnrick

4	DТ	4	٦,	F.	IV-

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

Title:	Name and Address:	
"AMBR" = Authorize	ed Member	
"MGR" = Manager		
AMBR	Robert Anthony Mammarelli	
1111121	6517 SE 33rd Trce	
	Okeechobee, Florida 34974	
AMBR	Michael Anthony Mammarelli	
- Amilia - 107 - 1	6517 SE 33rd Tree	~
	Okeechobee, Florida 34974	2821 AUG
AMBR	Santino Anthony Mammarelli	A Aug
AWIDA	6517 SE 33rd Tree	102
	Okeechobee, Florida 34974	<del></del>
		(7)
AMBR	Dominic Anthony Mammarelli	
	6517 SE 33rd Tree	<u> </u>
	Okcechobee, Florida 34974	<u> </u>
		-
(Use attachment if nec	Checaling)	
(OSC attachment if nec	263341 3 7	
RTICLE V. Effective date of	f other than the date of filing:	(OPTIONAL)
	ne date must be specific and cannot be more than five business	
ran enective date is issed, to te date of filing.)	le date must be specific and cannot be more than five positiess	days prior to or 50 days after
	in blank day, and mark the analisable exercises. Clim and increase	an abia dasa will was bu tinsud as
	nis block does not meet the applicable statutory filing requiremen	its, this date will not be listed as
he document's effective date of	on the Department of State's records.	
RTICLE VI: Other provisions	ic ifany	
ACTIVITIES VII. Other provincial	s, runy.	
	<u> </u>	
REQUIRED SIGNA	TURE:	
	Signature of a member or an authorized representative of a redecument is avacuted in accordance with section 605,0203 (1) (b)	
l his s	document is executed in accordance with section 50% (VIII L.(.).) th	i Nigrida Statutos

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.

Cheyenne Moseley, Legalzoom.com, Inc.

Typed or printed name of signer

# Filing Fees:

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

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

## Attachment to

# Articles of Organization for

Cowtown Performance Horses LLC

Additional members of the Limited Liability Company are:

Name of Member	<u>Address</u>
Nicola Anthony Mammarelli	6517 SE 33rd Trce., Okeechobee, Florida 34974
Melina Michelle Marnmarelli	6517 SE 33rd Tree., Okeechobee, Florida 34974
Sabrina Mammarelli	6517 SE 33rd Tree., Okeechobee, Florida 34974

