

121000467352

Smith Thompson Shaw

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

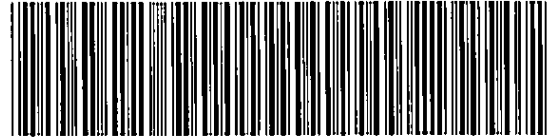
(Business Entity Name)

(Document Number)

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CALLAHAN SEC. INC.

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: ScanTake5, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

~~Stacy Small~~
Name of Person
Smith Thompson Shaw
Firm/Company
3520 Thomasville Road - 4th Floor
Address
Tallahassee, FL 32309
City/State and Zip Code
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

____ at (____) _____
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|---|---|---|---|

Mailing Address
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2021 OCT 29 PM 1:04
TALLAHASSEE, FL
DIVISION OF CORPORATIONS

Articles of Organization

of

ScanTake5, LLC

The undersigned, pursuant to the provisions of Chapter 605 of the Florida Statutes (the "Florida Revised Limited Liability Company Act"), for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

1. **NAME.**

The name of the Limited Liability Company is **ScanTake5, LLC** (hereinafter referred to as the "Company").

2. **PERIOD OF DURATION.**

The period of duration of the Company shall be perpetual, unless it is dissolved as provided in the Florida Limited Liability Act or the written Operating Agreement to be executed by all of the Members of the Company.

3. **PURPOSE.**

To engage in any and all other businesses and activities permitted by the laws of the State of Florida. The Company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.

4. **MAILING ADDRESS OF BUSINESS.**

The mailing address of the business in Florida for the Company is **4502 Rockbridge Hollow, Tallahassee, Florida 32309**. Such address may be changed from time to time as provided in the Operating Agreement.

5. **ADDRESS OF PLACE OF BUSINESS.**

The address of the place of business is **4502 Rockbridge Hollow, Tallahassee, Florida 32309**. Such address may be changed from time to time as provided in the Operating Agreement.

2021 JUN 29 PM 1:04
FILED

6. **REGISTERED AGENT.**

The initial registered agent in Florida for the Company is: **Andrew Scanameo**; the initial registered office is located at **4502 Rockbridge Hollow, Tallahassee, Florida 32309.**


7. **MANAGEMENT.**

The names and address of the persons authorized to manage and control the Limited Liability Company are as follows:


Andrew Scanameo
4502 Rockbridge Hollow
Tallahassee, Florida 32309

Luz A. Scanameo
4502 Rockbridge Hollow
Tallahassee, Florida 32309

EXECUTED at Tallahassee, Leon County, Florida this 28 day of October, 2021.



Andrew Scanameo



Luz A. Scanameo

2021 OCT 29 PM 1:04
TALLAHASSEE, FLORIDA

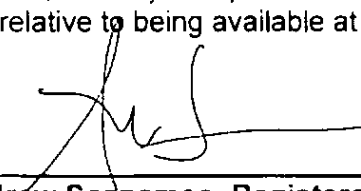
CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT WITH WHOM PROCESS MAY BE SERVED.

Pursuant to the provisions of Section 605 Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

1. The name of the limited liability company is **ScanTake5, LLC**.
2. The name of the registered agent and office is: **Andrew Scanameo, 4502 Rockbridge Hollow, Tallahassee, Florida 32309**

ACKNOWLEDGEMENT

Having been named to accept service of process for the above limited liability company, at the place designated in this certificate, I hereby accept to act in this capacity and agree to comply with the provision of said Act relative to being available at said location.



Andrew Scanameo, Registered Agent

2021 OCT 29 PM 1:04
TALLAHASSEE, FL 32309