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## FLORIDA FILING & SEARCH SERVICES, INC.

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DATE: 1/26/22

NAME: SOUTHSIDE RENTAL HOLDINGS, LLC

TYPE OF FILING: ARTICLES

COST: 125.00

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ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE at tage

#### **COVER LETTER**

	vision of Corporations			
SUBJECT	Southside Rental Holding	gs, LLC		
SUBJECT		Name of Limited Lia	bility Company	
The enclose	ed Articles of Organization a	and fee(s) are submit	ted for filing.	
Please retur	m all correspondence concer	ning this matter to th	ne following:	
	Paul Gionis			
		Name	of Person	
	Gionis, Lilly & Romero, Pl	LLC		
		Firm/	Company	
	1299 Main Street, Ste C			
		A	idress	
	Dunedin, FL 34698			
r	ogionis@gionislilly.com	City/State	and Zip Code	
		(to be used for futur	re annual report notificat	ion)
For further in	formation concerning this m	atter, please call:		
	Paul Gionis	727	534-0854	
-	Name of Person	at ( Area Code	Daytime Telephon	
Enclosed is	a check for the following an	nount:		
	Filing Fee  \$\square\$\$\$\square\$\$\$\$   \$\square\$\$\$\$\$   \$Certificate o	iling Fee & □\$ f Status Cer	155.00 Filing Fee & tified Copy onal copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address		Street Address	forfata
	New Filing Section Division of Corporation	ons	New Filing Section D The Centre of Tallaha	assec
	P.O. Box 6327 Tallahassee, FL 3231-	4	2415 N. Monroe Stre Tallahassee, FL 3230	•

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

ARTICLE I - Name:

Southside Rental F (Must co	ntain the words "Limited Lia	ability Company.	'L.L.C" or "LLC.")	
(		,,,	5.5.C., 5. 5.C.,	
ARTICLE II - Address:	- 4 d 6-b 1 - 65		CLER. 6	
The mailing address and street	address of the principal offic	ce of the Limited	Liability Company is:	
Princi	inal Office Address:		Mailing Address:	
1299 Main Street		1299	Main Street	
Ste D	· <del></del>	Ste I		
Dunedin, FL 34698			edin, FL 34698	<del></del>
ARTICLE III - Registered A (The Limited Liability Comparanother business entity with an	gent, Registered Office, & ny cannot serve as its own Renactive Florida registration.)	Registered Agent (Agent Agent	t's Signature:	• *
ARTICLE III - Registered A (The Limited Liability Comparanother business entity with an	gent, Registered Office, & ny cannot serve as its own Renactive Florida registration.) at address of the registered ag	Registered Agent (Agent Agent Agent (Agent Agent	t's Signature:	• *
ARTICLE III - Registered A (The Limited Liability Comparanother business entity with an	gent, Registered Office, & ny cannot serve as its own Renactive Florida registration.) at address of the registered ag	Registered Agent (Agent Agent	t's Signature:	2022 JAN 26 CECCETTRY TALLAHAS
ARTICLE III - Registered A (The Limited Liability Comparanother business entity with an	gent, Registered Office, & ny cannot serve as its own Renactive Florida registration.) at address of the registered ag	Registered Agent () ) gent are:  D, PLLC Name	t's Signature:	2022 JAN 26 SECRETIANS
ARTICLE III - Registered A (The Limited Liability Comparanother business entity with an	gent, Registered Office, & ny cannot serve as its own Renactive Florida registration.) at address of the registered ag  Gionis, Lilly & Romero	Registered Agent (Agent Agent	t's Signature: /ou must designate an individ	2022 JAN 26 SECRETIANS
ARTICLE III - Registered A (The Limited Liability Comparanother business entity with an	gent, Registered Office, & ny cannot serve as its own Renactive Florida registration.) et address of the registered ag  Gionis, Lilly & Romero  N  1299 Main Street, Ste C	Registered Agent (Agent Agent	t's Signature: /ou must designate an individ	2022 JAN 26 AMII SESSETTARY COS

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

## The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager MGR Gionis, Apostolos 1299 Main Street, Ste D Dunedin, FL 34698 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: \_. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Sionis Signature of a member or an authorized representative of a member. 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. **Apostolos Gionis** Typed or printed name of signee

Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)