

# L 22000073163

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

**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.

(((H22000066487 3)))



H220000664873ABC2

**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 : (850)617-6381

From:

Account Name : MCFARLAND, GOULD, LYONS, SULLIVAN & HOGAN, P.A.  
Account Number : I19990000015  
Phone : (727)461-1111  
Fax Number : (727)461-6430

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

Email Address: \_\_\_\_\_

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2022 FEB 21 PM 12:02

FILED

## FLORIDA LIMITED LIABILITY CO. WEEKDAY TOP SHOPPING LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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

**WEEKDAY TOP SHOPPING LLC**

**ARTICLE I - NAME AND MAILING ADDRESS**

The name of the Limited Liability Company is **WEEKDAY TOP SHOPPING LLC**, and its principal office address is 8313 Meadows Way, Desert Hot Springs, California 92240 and mailing address is 8313 Meadows Way, Desert Hot Springs, California 92240.

**ARTICLE II - REGISTERED AGENT, REGISTERED OFFICE &  
REGISTERED AGENT'S SIGNATURE**

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

Gary W. Lyons, Esquire  
311 South Missouri Avenue  
Clearwater, Florida 33756

*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, 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.*

*Gary W. Lyons*

**GARY W. LYONS, Registered Agent**

**ARTICLE III - MANAGEMENT**

This Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed Company. The initial Manager shall be **TERESA VAN BENTHUYSEN**, 1425 Magnolia Drive, Clearwater, Florida 33756.

Prepared By:  
McFarland, Gould, Lyons,  
Sullivan & Hogan, P.A.  
Gary W. Lyons, Esq.  
FBN: 0268186  
311 S. Missouri Avenue  
Clearwater, FL 33756  
(727) 461-1111

2022 FEB 21 PM 12:03  
STATE OF FLORIDA

FILED

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization for a Florida Limited Liability Company this 18<sup>th</sup> day of February, 2022.

  
TERESA VAN BENTHUYSEN  
Title: Authorized Manager

*(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 section 817.155, F.S.)*

FILED  
2022 FEB 21 PM 12:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA