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COVER LETTER

	ew Filing Section ivision of Corporations
	. VIPER BASS BAITS
SUBJECT	Name of Limited Liability Company
The enclos	ed Articles of Organization and fee(s) are submitted for filing.
Please retu	rn all correspondence concerning this matter to the following:
	MICHAEL A. MARKISELLO Name of Person
	Name of Person
	Pi-m/Commons
	Firm/Company
	386 SW APPALACHEE TERR.
	Address
	FORT WHITE, FL 32038
	FORT WHITE, FL 32038 City/State and Zip Code S/6722@ ao/.com
•	E-mail address: (to be used for future annual report notification)
For further i	nformation concerning this matter, please call:
	The state of the s
n	11CHAFI MARKRELLO 772 205 - 8857
	E-mail address: (to be used for future annual report notification) Information concerning this matter, please call: 1/CHAEL MARKSELLO at 772 205 - 8857 Name of Person Area Code Daytime Telephone Number
Enclosed i	s a check for the following amount:
	Filing Fee \$\infty\$\$130.00 Filing Fee & \$\square\$\$\$\$155.00 Filing Fee & \$\square\$
C13125.00	Certificate of Status Certified Copy Certificate of Status &
	(additional copy is enclosed) Certified Copy (additional copy is enclosed)
	Mailing Address Street Address
	New Filing Section New Filing Section Division
	Division of Corporations The Centre of Tallahassee

P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

VIPER BASS BAITS, LLC.

(Must contain 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:

386 SW APPALACHEE TERR. 386 SW APPALACHEE TE FORT WHITE, FL 32038 FORTWHITE, FL 30038

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

MICHAZL A. MARKISELLO Name

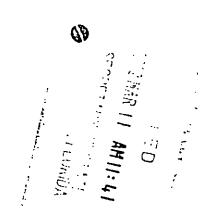
386 SW APPALACHEE TERRACE

Florida street address (P.O. Box NOT acceptable)

FORTWHITE FL
City State

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..

(CONTINUED)



ARTICLE IV-

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

Title: "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager <i>A_MBR</i>	MICHAEL MARKISELLO 386 SW APPALA CHEE TERRACE FORT WHITE, FL 32038
AMBR	STEPHANIE MARKISELLO 3865W APPALACHEE TERRACE FORT WHITE, FL 32038
the date of filing.)	late of filing:
the document's effective date on the Departme ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	n m
This document is exe I am aware that any fi	member or an authorized representative of a member. ecuted in accordance with section 605.0203 (1) (b), Florida Statutes, alse information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.
MICH	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)

\$ 5.00 Certificate of Status (Optional)