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D. O'KEEFE APR 1 9 2022

COVER LETTER

	Sew Filing Section Division of Corporations			
	Mystic Pottery LLC			
SUBJEC'		imited Liabili	ty Company	
The enclo	sed Articles of Organization and feets) a	are submitted	for filing.	
Please ret	urn all correspondence concerning this o	natter to the f	ollowing:	
	Madison McCloskey			
		Name of	Person	
	Mystic Pottery			
		Firm/Cor	npany	
	370 16th St NE			
		Addre	:58	
	Naples FL 34120			
	madisonmccloskey0418@gm	City/State and	l Zip Code	
	E-mail address: (to be use	d for future a	nnual report notificati	on)
For further	information concerning this matter, plea	se call:		
	madicon moonoono,	239	238-8868	
			Daytime Telephon	
Enclosed	is a check for the following amount:			
₩ \$125.0	0 Filing Fee	Centific	i,00 Filing Fee & ed Copy el copy is enclosed)	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 Di The Centre of Tallaha 2415 N. Monroe Stree Tallahassee, Fl. 3230	issee et, Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability Company is:	
Mystic Pottery LLC	
(Must contain the words "Limited Liabilit	y 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:
7901 4th St N STE 300	7901 4th St N STE 300
St. Petersburg FL	St. Petersburg FL 33702
7001 Ath Ct N CTE 200 Ct Detector El 22702	7001 4th CLM CTE 200 Ct Detections El 22702

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:

Northwest Regis	stered Agent Ll	LC
	Name	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
7901 4th St N S	TE 300	
Florida street address	s (P.O. Box <u>NOT</u> ac	cceptable)
St. Petersburg	FL	33702
City	State	Zip

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)

ARTICLE IV-

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

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager AMBR	Madiana Madinata	
AWDN	Madison McCloskey	
	370 16th St NE	
	Naples FL 34120	
		
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(Use attachment if necessary)		SE 5
ICLE V: Effective date, if other than the d	3/21/2022	(OPTIONAL)
effective date is listed, the date must be ate of filing.)  1 If the date inserted in this block does no ocument's effective date on the Departme ICLE VI: Other provisions, if any.	ot meet the applicable statutory filing	
REQUIRED SIGNATURE:	usoul Mallocke	est
This document is exe	member or an authorized represent cuted in accordance with section 605.	tarive of a member. .0203 (1) (b), Florida Statutes.
constitutes a third deg Madison M	ilse information submitted in a docum free felony as provided for in s.817.15 IcCloskey	ient to the Department of State 55, F.S.

# 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)