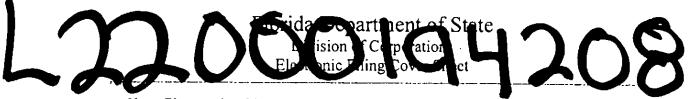
5/11/22, 2:10 PM

**Division of Corporations** 



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.

(((H220001694073)))



H220001694073ABC

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 : SHUFFIELD LOWMAN Account Number : 120030000118 Phone : (407)581-9800 Fax Number : (407)581-9801

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

Email Address: registeredagent-jad@shuffieldlowman.com

2022 MAY 11 PM 2: 32

# FLORIDA LIMITED LIABILITY CO. BLACK HORSE HOLDINGS, LLC

FOEIVED AYII PH 3: 10

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

(((H220001694073)))

# ARTICLES OF ORGANIZATION OF BLACK HORSE HOLDINGS, LLC A Florida Limited Liability Company

#### ARTICLE I NAME

The name of this limited liability company is **BLACK HORSE HOLDINGS**, **LLC**, referred to in these Articles of Organization as the "Company."

## ARTICLE II MAILING AND STREET ADDRESS

The street address of the principal office of the Company is as follows:

123 W Main Street Leesburg, FL 34748

The mailing address of the principal office of the Company is as follows:

123 W Main Street Leesburg, FL 34748

# CABLE AND/OR VIDEO FRANCHISING PRANCHISING PRANCHISING PRANTIONS TALLAHASSEE, FLORIDA

## ARTICLE III COMMENCEMENT OF COMPANY'S EXISTENCE

In accordance with Section 605.0207, Florida Statutes, the Company's existence shall be deemed to have commenced at 12:01 a.m., on the date and at the time the record is filed as evidenced by the Florida Department of State's endorsement of the date and time on the record.

### ARTICLE IV REGISTERED AGENT

The name and Florida street address of the initial Registered Agent are as follows:

Jason A. Davis, Esq.
Shuffield, Lowman & Wilson, P.A.
545 West Main Street
Tavares, FL 32778

(((H220001694073)))

#### ARTICLE V MANAGEMENT

The name and address of each person initially authorized to manage and control the Company, until their successors are appointed, are as follows:

Name and Address
Paige Chassic 123 W Main Street Leesburg, FL 34748

#### ARTICLE VI APPLICABLE LAW

The Company is created pursuant to Chapter 605, Florida Statutes, and shall be governed by the laws of the State of Florida.

Lason A. Davis, Esq., as Authorized Representative

# ACCEPTANCE OF DESIGNATION OF REGISTERED AGENT

Pursuant to the provisions of Section 605.0113, Florida Statutes, the undersigned submits the following statement of acceptance of his designation as Registered Agent for the Company:

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 of the Florida Statutes.

Jason A. Davis, Esq.