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(Requestor's Name)				
(Address)				
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(City/State/2	Zip/Phone #)			
PICK-UP	WAIT MAIL			
(Business E	Entity Name)			
(Document Number)				
Certified Copies C	ertificates of Status			
Special Instructions to Filing Officer:				

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T. SCOTT MAY 2 4 2022



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COVER LETTER

	iew Filing Sec Division of Co				
SUBJECT	Casa Catrir	na Hospitality, LLC			
SOBJEC	·	Name	of Limited Liab	oility Company	-
The enclos	sed Articles of	Organization and fe	e(s) are submitte	ed for filing.	
Please retu	ırn all correspo	ondence concerning t	his matter to the	c following:	
	Philip A. Ba	tes			
			Name	of Person	
	Philip A. Ba	tes, PA			
	Firm/Company				
	25 West Cedar Street, Suite 550				
			Ad	dress	
	Pensacola, F	L 32502			
			•	and Zip Code	
				onjordan4862@gmail.c e annual report notificat	
Conforther				e umaar report notmea	, indity
roi iuruici	iniormation co	ncerning this matter,	piease cair:		
	Philip A. Bat	es	850 at (470-0091)	
	Narr	ne of Person	Area Code	Daytime Telephor	ne Number
Enclosed	is a check for t	he following amount			
		•	Fee & □S tus Cert	155.00 Filing Fee & ified Copy onal copy is enclosed)	□S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	<u>Mailir</u>	ng Address		Street Address	
		Filing Section On of Corporations		New Filing Section D The Centre of Tallah	
		on of Corporations Sox 6327		2415 N. Monroe Str	
		assee, FL 32314		Tallahassee, FL 323	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
Casa Catrina Hospitality, LLC	
(Must contain the words "Limited Liability Contains the words")	Company, "L.L.C.," or "LLC.")
ARTICLE 11 - Address: The mailing address and street address of the principal office of the	ne Limited Liability Company is:
Principal Office Address:	Mailing Address:
1113 N. Davis Highway	1113 N. Davis Highway
Pensacola, FL 32503	Pensacola, FL 32503
ARTICLE III - Registered Agent, Registered Office, & Regist (The Limited Liability Company cannot serve as its own Registere another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are	ed Agent. You must designate an individual or
Ronald D. Jordan	
Name	
1113 N. Davis Highway	
Florida street address (P.O. B	ox <u>NOT</u> acceptable)

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..

Pensacola

City

FL

State

Registered Agent's Signature (REQUIRED)

32503

Zip

(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	
MGR	Ronald D. Jordan 1113 N. Davis Highway Pensacola, FL 32503
	relisacola. PL 32303
n effective date is listed, the date must be date of filing.)	date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 90 days after ot meet the applicable statutory filing requirements, this date will not be listed as ent of State's records
FICLE VI: Other provisions, if any.	on on state 3 records.
REQUIRED SIGNATURE:	IS In
Signature of a This document is ex I am aware that any f	member or an authorized representative of a member. ecuted in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.
Ronald D. Jor	Typed or printed name of signec

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)