

L22000278089

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

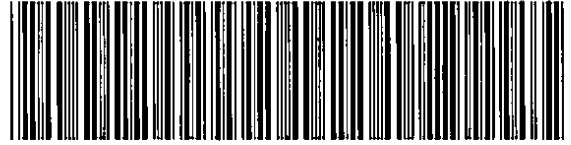
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600388836036

06/16/22--01011--023 **125.00

RECEIVED
FILED
2022 JUN 16 PM 3:39
2022 JUN 16 PM 12:50
TALLAHASSEE, FL 091
TALLAHASSEE, FL

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

WALK IN

PICK UP: 6/16 DANNY

CERTIFIED COPY

XX PHOTOCOPY

CUS

XX FILING

LLC

1. **HOMETOWN JEWELERS LLC**

(CORPORATE NAME AND DOCUMENT #)

2. _____
(CORPORATE NAME AND DOCUMENT #)

3. _____
(CORPORATE NAME AND DOCUMENT #)

4. _____
(CORPORATE NAME AND DOCUMENT #)

5. _____
(CORPORATE NAME AND DOCUMENT #)

6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:**

ARTICLES OF ORGANIZATION
FOR
HOMETOWN JEWELERS LLC
FLORIDA LIMITED LIABILITY COMPANY

FILED

2022 JUN 16 PM 12: 50

SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE I - NAME:

The name of the Limited Liability Company is: HOMETOWN JEWELERS LLC

ARTICLE II - ADDRESS:

The mailing address and street address of the principal office of the Limited Liability Company is:

PRINCIPAL OFFICE ADDRESS:

13800 Tamiami Trail North, Suite #105
Naples, Florida 34110

MAILING ADDRESS:

13800 Tamiami Trail North, Suite #105
Naples, Florida 34110

ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

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

Kyle B. Kelly
Name
2390 Tamiami Trail North, Suite #204
Florida street address (P.O. Box NOT acceptable)
Naples, Florida 34103
City, State, and 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

ARTICLE IV - MANAGER(S) OF MANAGING MEMBER(S):

The name and address of each Manager or Managing Member is as follows:

TITLE:

"MGR" - Manager

"MGRM" = Managing Member

MGR

AMBR

NAME AND ADDRESS:

KEVIN DENNEY

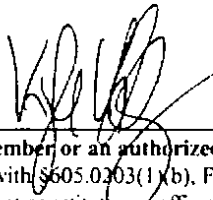
13800 Tamiami Trail North, Suite #105
Naples, Florida 34110

(Use attachment if necessary)

ARTICLE V - EFFECTIVE DATE

The effective date of HOMETOWN JEWELERS LLC is June 15th, 2022

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.
(In accordance with §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 in §817.155, F.S.)

Kyle B. Kelly

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)

SECRETARY OF STATE
TALLAHASSEE, FL

2022 JUN 16 PM 12:50

FILED