Laa 000346605

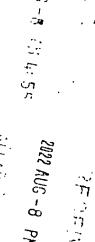
(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



300390191353

S. CHATHAM AUG - 9 2022



CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195	
REFERENCE: 869260 7550102	
AUTHORIZATION: Spelledenson	
COST LIMIT : \$ 125.00	
ORDER DATE : August 8, 2022	22.7
ORDER TIME: 1:39 PM	AUG -,
ORDER TIME: 1:39 PM	
ORDER NO. : 869260-005	; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ;
CUSTOMER NO: 7550102	t. 5 n
DOMESTIC FILING	
NAME: LEITER HOLDINGS, LLC	
EFFECTIVE DATE:	
ARTICLES OF INCORPORATION	
CERTIFICATE OF LIMITED PARTNERSHIP	
XX ARTICLES OF ORGANIZATION	
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:	
CERTIFIED COPY	
XX PLAIN STAMPED COPY	
CERTIFICATE OF GOOD STANDING	
CONTACT PERSON: Alexxis Weiland - EXT.	

EXAMINER'S INITIALS:

		CO	VER LETTER	
TO:	New Filing Sec Division of Co			
SUBJE		OLDINGS, LLC		
30001		Name of Lin	nited Liability Company	
The en	closed Articles of	Organization and fee(s) are	e submitted for filing.	
Please	return all correspo	ondence concerning this ma	atter to the following:	
	MATTHEW	LEITER		
			Name of Person	
			Firm/Company	•
	1343 MAIN	STREET, UNIT 419		
		<u> </u>	Address	
	SARASOTA	a, FL 34236		22 /
		С	ity/State and Zip Code	
	MLEITER@1	TRILOGYREG.COM		
	j	E-mail address: (to be used	for future annual report notific	ation)
For furth	er information co	ncerning this matter, please	call:	ation)
	MATTHEW		2 750-0900	
	Nam		rea Code Daytime Teleph	one Number
Enclose	ed is a check for the	he following amount:		
■ \$125	5.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	☐\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

New Filing Section Division of Corporations

Street Address New Filing Section Division The Centre of Tallahassee

ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

ARTICLE I - Name:

LEITER HOLDINGS, LLC (Must contain the words "Limited Liab	ility Company, "L.L.C	.," or "LLC.")	_
ARTICLE II - Address: The mailing address and street address of the principal office	of the Limited Liabili	ty Company is:	
Principal Office Address:		Mailing Address:	
1343 MAIN STREET, UNIT 419	1343 MAIN	STREET, UNIT 419	
SARASOTA, FL 34236	SARASOTA	A, FL 34236	
			_
(The Limited Liability Company cannot serve as its own Reg another business entity with an active Florida registration.)	istered Agent. You mu		- 22
(The Limited Liability Company cannot serve as its own Reg another business entity with an active Florida registration.)	istered Agent. You mu		\sim
(The Limited Liability Company cannot serve as its own Reg another business entity with an active Florida registration.) The name and the Florida street address of the registered age CORPORATION SERVI	istered Agent. You mu nt are: CE COMPANY		2 ALIG -
	istered Agent. You mu nt are:		2 AUG -8
(The Limited Liability Company cannot serve as its own Reg another business entity with an active Florida registration.) The name and the Florida street address of the registered age CORPORATION SERVI	istered Agent. You mu nt are: CE COMPANY		2 AUG -8 KH
(The Limited Liability Company cannot serve as its own Reg another business entity with an active Florida registration.) The name and the Florida street address of the registered age CORPORATION SERVI Na	istered Agent. You mu nt are: CE COMPANY me	st designate an individual or	2 hUG -8 K! 4:
(The Limited Liability Company cannot serve as its own Reg another business entity with an active Florida registration.) The name and the Florida street address of the registered age CORPORATION SERVI Na 1201 HAYS STREET	istered Agent. You mu nt are: CE COMPANY me	st designate an individual or	2 AUG -8 KH

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:

11 A 3 ATS FS 14 6		nd Address:
"AMBR" = A "MGR" = Ma	nthorized Member	
MGR	MATTHEW I	FITER
MOR	1342 MAIN S	TREET, UNIT 419
	SARASOTA.	FL 34236
		22
		>
		
		رن د
		.v. ·
ICLE V: Effective	nt if necessary) date, if other than the date of filing: sted, the date must be specific and cannot	
ICLE V: Effective attention of filing.)	date, if other than the date of filing:sted, the date must be specific and cannot	be more than five business days prior to or 90 days a statutory filing requirements, this date will not be list
ICLE V: Effective attention of filing.)	date, if other than the date of filing:sted, the date must be specific and cannot ed in this block does not meet the applicable e date on the Department of State's records.	be more than five business days prior to or 90 days a statutory filing requirements, this date will not be list
ICLE V: Effective at the interest of filing.) If the date insert ocument's effective ICLE VI: Other process.	date, if other than the date of filing:sted, the date must be specific and cannot ed in this block does not meet the applicable e date on the Department of State's records.	be more than five business days prior to or 90 days a statutory filing requirements, this date will not be list
ICLE V: Effective at the interest of filing.) If the date insert ocument's effective ICLE VI: Other process.	date, if other than the date of filing:sted. the date must be specific and cannot ed in this block does not meet the applicable e date on the Department of State's records. ovisions, if any.	be more than five business days prior to or 90 days a statutory filing requirements, this date will not be listed
ICLE V: Effective at the interest of filing.) If the date insert ocument's effective ICLE VI: Other process.	date, if other than the date of filing: sted, the date must be specific and cannot ed in this block does not meet the applicable e date on the Department of State's records. ovisions, if any. Signature of a member or an author This document is executed in accordance.	statutory filing requirements, this date will not be listed representative of a member. with section 605.0203 (1) (b), Florida Statutes, aitted in a document to the Department of State
ICLE V: Effective at the interest of filing.) If the date insert ocument's effective ICLE VI: Other process.	date, if other than the date of filing: sted, the date must be specific and cannot ed in this block does not meet the applicable e date on the Department of State's records. ovisions, if any. Signature of a member or an author This document is executed in accordance of a management	statutory filing requirements, this date will not be listed representative of a member. with section 605.0203 (1) (b), Florida Statutes, aitted in a document to the Department of State

as

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)