

L23000072835

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

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FEB 16 2023

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LLC

**1. THE SAMBUCA HOUSE 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 FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

THE SAMBUCA HOUSE LLC

(Must contain the words "Limited Liability 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:

8330 Wildflower Drive,  
Brooksville, FL 34602

Mailing Address:

8330 Wildflower Drive,  
Brooksville, FL 34602

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:

MICHAEL DeRITIS

Name

8330 Wildflower Drive

Florida street address (P.O. Box **NOT** acceptable)

Brooksville

FL

34602

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..*

/S/ MICHAEL DeRITIS

\_\_\_\_\_  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

AMBR

MICHAEL DeRITIS  
8330 Wildflower Drive  
Brooksville, FL 34602

IAN MORRELL  
28 Marilynn Street  
East Islip, NY 11730

SECRET, RY OF STATE  
TALLAHASSEE, FL

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**ARTICLE VI:** Other provisions, if any.

/S/ MICHAEL DeRITIS

MICHAEL DeRITIS

**Filing Fees:**

**\$ 5.00 Certificate of Status (Optional)**