

# L23000103563

Florida Department of State  
Division of Corporations  
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**To:**

Division of Corporations  
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**From:**

Account Name : FL PATEL LAW PLLC  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: jamesrrrslocum@gmail.com

## FLORIDA LIMITED LIABILITY CO.

### Jr Slocum's Concessions LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

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FALLAHASSEE, FLORIDA

2023 MAR -6 PM 1:11

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**ARTICLES OF ORGANIZATION**  
**FOR**  
**JR SLOCUM'S CONCESSIONS LLC**  
**A FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I.**  
**Name**

The name of the Limited Liability Company is: Jr Slocum's Concessions LLC (the "Company").

**ARTICLE II.**  
**Address**

The principal office and mailing address of the Company is:

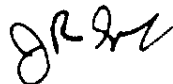
13106 Pirate Ln.  
Spring Hill, Florida 34609

**ARTICLE III.**  
**Registered Agent, Registered Office, & Registered Agent's Signature**

The name and the Florida Street Address of the Registered Agent are:

James R. Slocum  
13106 Pirate Ln.  
Spring Hill, FL 34609

*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.*



James R. Slocum

(sign)


**ARTICLE IV.**  
**Authorized Members and Managers**

The Name and Address of each person authorized to manage and control the Limited Liability Company:

<u>Title</u>	<u>Name and Address</u>
AMBR = Authorized Member MGR = Manager	
<u>MGR</u>	James R. Slocum 13106 Pirate Ln. Spring Hill, Florida 34609

**ARTICLE V.**

The Effective date shall be the date of filing.



(sign)

**Signature of a member or an authorized representative of a member.**

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  
I am aware that any false information submitted in a document to the Department of State  
constitutes a third degree felony as provided for in s.817.155, F.S.

James R. Slocum

Authorized Representative/Member

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