

# L23000154376

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

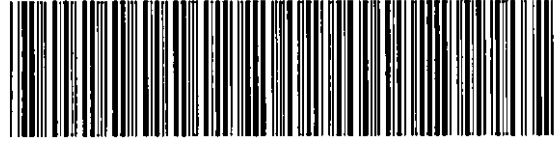
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400404132194

FILED  
2023 MAR 14 AM 4:26  
CLERK OF STATE  
TALLAHASSEE, FL

28

COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: Kona Ice of South Central Jacksonville, LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Penny Hopper  
Name of Person

Dale S. Wilson, P.A.  
Firm/Company

(mail) PO Box 1808; physical 718 North Orange Ave.  
Address

Green Cove Springs FL 32043  
City/State and Zip Code

carlyallen904@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Penny Hopper at 904, 284-5718 x 104  
Name of Person Area Code Daytime Telephone Number

RECEIVED  
TALLAHASSEE, FL

5/23 MAR 14 AM 4:26

FILED

Enclosed is a check for the following amount:

- ☒ \$125.00 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  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address

New Filing Section Division  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF ORGANIZATION**

**OF**

**Kona Ice of South Central Jacksonville, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby makes, acknowledges, and files the following Articles of Organization.

**ARTICLE I  
NAME**

The name of the Limited Liability Company is:  
Kona Ice of South Central Jacksonville, LLC

**ARTICLE II  
NATURE OF BUSINESS**

The general character, purpose, and nature of business to be transacted by this Company is any and all lawful business.

**ARTICLE III  
ADDRESS**

The mailing address and street address of the principal office of the company is Romeo Point Lane, Fleming Island, Florida 32003.

**ARTICLE IV  
DURATION**

The period of duration for the Limited Liability Company shall be perpetual.

**ARTICLE V  
REGISTERED OFFICE/AGENT**

The registered office of this Limited Liability Company is 2121 Romeo Point Lane, Fleming Island, Florida 32003, and the Registered Agent at such location is Carly Renee Allen.

FILED  
2023 MAR 14 AM 4:26  
CLERK OF STATE  
TALLAHASSEE, FL

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 608, F.S.



Carly Renee Allen

**ARTICLE VI**  
**MANAGER**

**Title:**

**Name and Address:**

Managing Member

Carly Renee Allen  
2121 Romeo Point Lane  
Fleming Island, FL 32003

In accordance with F.S. 608.408(3), the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.



Carly Renee Allen, Manager

SECRETARY OF STATE  
TALLAHASSEE, FL

2023 MAR 14 AM 4:26

FILED