La3000200399

(Řŧ	equestor's Name)	
(***	, 4000.00	
(Ac	idress)	
`	,	
(Ac	ldress)	-
(Ĉi	ty/State/Zip/Phon	e #)
_	_	_
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		

Office Use Only



600405818566

S. CHIT TARNI APR L 2023

2023 APR 24 AH 8: 29 & STORY TO STORY T

) AM

23 APR 24 AM 8: 12

GRANCO

COVER LETTER

.

	ew Filing Sec vision of Cor					
SUBJECT:	Neu	Milantic F	Agancy LC nited Liability Company			
		Name of Lin	nited Liability Company			
The enclose	ed Articles of	Organization and fee(s) ar	e submitted for filing.			
Please retur	n all correspo	ondence concerning this ma	atter to the following:			
	Danie	olle Diamake	×14			
			≥ ✓ 1 ∪			
			Firm/Company			
	8 0 0		C .			
	37	125 W +	lagier St.			
		<u>,</u>	_			
	Mia	mi FL	33(34 ity/State and Zip Code	<u></u>		
		C	ity/State and Zip Code			
-	<u> </u>	<u>- Alabakerii</u> E-mail address: (to be used	for future annual report notificati	on)		
ror inther in	погивной сог	ncerning this mutter, please	: caii:			
Da	nieile [) about 1/4 all	11 1 875 3	130		
-	Nam	e of Person A	rea Code Daytime Telephone	2 Number		
Enclosed is	a check for th	ne following amount:				
□\$125.00	Filing Fee	∑\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐S160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
	<u>M</u> ailin	g Address	Street Address			
		ling Section	New Filing Section Di The Centre of Tallaha	New Filing Section Division		
		on of Corporations ox 6327	2415 N. Monroe Stree			
		issee, FL 32314	Tallahassee, FL 32301	3		

ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

ARTICLE	1 - 3	Name:	

The name of the Limited Liability Company is:

New Atlantic Agency LLC." or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
871 Ne 8157 ST Michon: FL 73138	3728 W. Flagror 27 APR
ARTICLE III - Registered Agent, Registered Offic (The Limited Liability Company cannot serve as its of another business entity with an active Florida registra The name and the Florida street address of the register	Registered Agent. You must designate an individual or
Dancelle) carbatary
Florida street add	E(ST ST (P.O. Box NOT acceptable)
City	FL 33136 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

A	RT	1	C	L	1	ν.
/ 1	18	1 1	3 I			, -

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	Danie 11e Diarbakering II AP TI
(If an effective date is listed, the date must be the date of filing.)	ate of filing: <u>OF 124-123</u> (OPTIONAL) specific and cannot be more than five business days prior to or 90 days after of meet the applicable statutory filing requirements, this date will not be listed as
the document's effective date on the Departme	
REOUIRED SIGNATURE:	DRO
This document is exe I am aware that any fa	member or an authorized representative of a member, cuted in accordance with section 605.0203 (1) (b), Florida Statutes, alse information submitted in a document to the Department of State tree felony as provided for in s.817.155, F.S.
_Danie	Typed or printed name of signee

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)