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COVER LETTER

	w Filing Sect vision of Corp				Check 478
cup incr		Anne DiCiero 23 N. Hillsi	ide Ave. Co	ndo LLC.	478
SUBJECT:	·	·			
The enclose	ed Articles of G	Organization and fee(s) are	e submitted	for filing.	
Please retur	n all correspo	ndence concerning this ma	itter to the f	ollowing:	
	Anne DiCiero)			
			Name of	Person	
			Firm/Co	npany	
	1955 Poincia	na Road			
		·	Addre	ess	
	Winter Park,	FL 32792			
			ity/State and	l Zip Code	
<u> </u>	licieroanne@g				
	E	-mail address: (to be used	for future a	nnual report notificat	ion)
For further in	formation con	ncerning this matter, please	e call:		
	Anne DiCiero	40 at (at		276-2921	
-	Namo			Daytime Telephon	ne Number
Enclosed is	a check for th	e following amount:			
□\$125.00	Filing Fce	□\$130.00 Filing Fee & Certificate of Status	Certific	5.00 Filing Fec & ed Copy al copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is ACRE)

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 FOR FLORIDA LIMITED LIABILITY COMPANY

Jeffrey and Anne DiCiero 23 N. Hillside Ave. Co	ondo LLC.
(Must contain the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
TCLE II Addrocce	
ICLE II - Address:	of the Limited Liability Company is:
TCLE II - Address: mailing address and street address of the principal office	of the Limited Liability Company is:
	of the Limited Liability Company is: Mailing Address:
mailing address and street address of the principal office	

The name and the Florida street address of the registered agent are:

another business entity with an active Florida registration.)

Anne DiCiero		
	Name	
1955 Poinciana Roa	d	
Florida street addres	ss (P.O. Box <u>NOT</u> ac	cceptable)
Winter Park	FL	32792
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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

2023 MAY -2 AM 9: 1
SECRETARY OF STAT

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ARTICLE IV-

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

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Mer	nber
"MGR" = Manager	
AMBR	Anne DiCiero
AMBR	1955 Poinciana Road
	Winter Park, FL 32792
	1 70 m.
AMBR	Jeffrey DiCiero
	1955 Poinciana Road Winter Park, FL 32792
	Williet Park, FL 32792
	·
	Δ.
(Use attachment if necessar	y)
	(OPTIONAL)
	than the date of filing: 04/27/2023 (OPTIONAL)
	e must be specific and cannot be more than five business days prior to or 90 days after
he date of filing.)	
	ck does not meet the applicable statutory filing requirements, this date will not be listed as
he document's effective date on the	Department of State's records.
ARTICLE VI: Other provisions, if an	y.
REQUIRED SIGNATURE	E: / (\ \ \ \
	Nune WILLERD
Signs	sture of a member or an authorized representative of a member.
	pont is executed in accordance with section 605 0203 (1) (b) Florida Statutos

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.

Anne DiCiero

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)

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