

KA3000331877

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

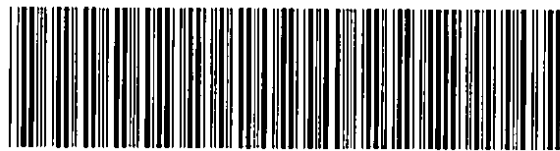
(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer.

KA300096123

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2023 JUL 12 PM 2:24

CALLAHAN, FLORIDA

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Siesta Paradise, LLC

Please Debit FCA000000003 For: 125

Thank you Seth Neeley



Signature

Requested by: SETH

Name

Date

Time

Walk-In

Will Pick Up

125 Pender & Printing • Tallahassee, FL 32301

- ___ Art of Inc. File _____
- ___ LTD Partnership File _____
- ___ Foreign Corp. File _____
- ___ L.C. File _____
- ___ Fictitious Name File _____
- ___ Trade/Service Mark _____
- ___ Merger File _____
- ___ Art. of Amend. File _____
- ___ RA Resignation _____
- ___ Dissolution / Withdrawal _____
- ___ Annual Report / Reinstatement _____
- ___ Cert. Copy _____
- ___ Photo Copy _____
- ___ Certificate of Good Standing _____
- ___ Certificate of Status _____
- ___ Certificate of Fictitious Name _____
- ___ Corp Record Search _____
- ___ Officer Search _____
- ___ Fictitious Search _____
- ___ Fictitious Owner Search _____
- ___ Vehicle Search _____
- ___ Driving Record _____
- ___ UCC 1 or 3 File _____
- ___ UCC 11 Search _____
- ___ UCC 11 Retrieval _____
- ___ Courier _____

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

SIESTA PARADISE, LLC

Please Debit FCA000000003 For: 125

Thank you Seth Neeley



Signature

Requested by: seth

Name

Date

Time

Walk-In

Will Pick Up

- ___ Art of Inc. File _____
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- ___ Courier _____



FLORIDA DEPARTMENT OF STATE
Division of Corporations

July 13, 2023

CAPITAL CONNECTION, INC.

SUBJECT: SIESTA PARADISE, LLC
Ref. Number: W23000096123

We have received your document for SIESTA PARADISE, LLC. However, the document has not been filed and is being returned for the following:

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Karen Lovelace
Regulatory Specialist II

Letter Number: 723A00015560

FILED
2023 JUL 13 AM 4:38
SECRETARY OF STATE
TALLAHASSEE FL

ARTICLES OF ORGANIZATION

SIESTA PARADISE, LLC

The undersigned Member, or an authorized representative of a Member, for the purpose of forming a Florida Limited Liability Company, hereby adopts the following Articles of Organization:

Article I

The name of the Limited Liability Company is:

SIESTA PARADISE, LLC

Article II

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

128 Huntington Place
Tupelo, MS 38801

The mailing address of the Limited Liability Company is:

128 Huntington Place
Tupelo, MS 38801

Article III

The purpose for which this Limited Liability Company is organized is:

ANY AND ALL LAWFUL BUSINESS.

Article IV

The effective date for this Limited Liability Company shall be the filing date of these Articles with the Florida Department of State.

Article V

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

Your Capital Connection, Inc.
417 E. Virginia Street, Suite 1
Tallahassee, FL 32301

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SECRETARY OF STATE
TALLAHASSEE, FL

Having been named as registered agent 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 signature: _____

Dated: _____

Article VI

This is a Member Managed Limited Liability Company. The name and address of the Members are) as follows:

David R. Pannell
128 Huntington Place
Tupelo, MS 38801

Sharon L. Pannell
128 Huntington Place
Tupelo, MS 38801

Signature of a Member or an authorized representative of a Member:



DAVID R. PANNELL

Dated: _____

5793815.12948

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TALLAHASSEE, FL