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| (Requestor's Name)                      |
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| Special Instructions to Filing Officer: |
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# COVER LETTER

| TO: New Filing Section<br>Division of Corporations                         |
|--|
| SUBJECT: Pitch + Peak Events LLC<br>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:  |
| Jennifer Ford  |
| Name of Person   |
|  |
| Firm/Company   |
| 7914 McClure Drive   |
| Address  |
| Tallahassee Florida 32312  |
|  |
| E-mail address: (to be used for future annual report notification)         |
| For further information concerning this matter, please call:               |

Jenou at ( Area Code Daytime Telephone Number Name of Person

Enclosed is a check for the following amount:

S125.00 Filing Fee

,

D\$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 FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE 1 - Name:

The name of the Limited Liability Company is:

(Must contain the words "Limited Liability Company, "L.L.C.," 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: |
|---------------------------|------------------|
| 7914 McClure Drive        | Same             |
| Tallahassee Florida 32312 |                  |

### ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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



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)

## ARTICLE IV-

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

| Title:<br>"AMBR" = Authorized Member | Name and Address:        |
|--------------------------------------|--------------------------|
| "MGR" = Manager                      | Torrey Ford              |
|                                      | The hasses Floride 32312 |
|                                      | <u> </u>                 |
|                                      |                          |
|                                      |                          |
|                                      |                          |
| <u></u>                              |                          |
|                                      |                          |

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_\_\_\_. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

| REQUIRED SIGNATURE:  |                 |
|--|-----------------|
| KLUUIKLD SIGOATOIU   |                 |
|  |                 |
| Signature of a member or an authorized representat                                       | ive of a member |
| This document is executed in accordance with section 605.02                              |                 |
| I am aware that any false information submitted in a documen                             |                 |
| constitutes a third degree felony as provided for in s.817.155.                          |                 |
|  |                 |
|  |                 |
| Jennifer ford  |                 |
| <u> </u>   |                 |
|  |                 |
| Filing Fees:   |                 |
| Filing Fees:<br>\$125.00 Filing Fee for Articles of Organization and Designation of Regi | stered Agent    |
| Filing Fees:   | stered Agent    |

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