

L24000060521

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

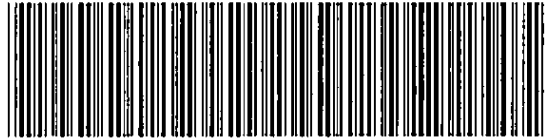
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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01/03/24--01034--020 **125.00

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27 JAN -3 PM 5:00
TALLAHASSEE
FLORIDA

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Still No Pickles, 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:

Star M. Sansone

Name of Person

Salter Feiber, P.A.

Firm/Company

3940 NW 16th Blvd. Bldg. B.

Address

Gainesville, FL 32605

City/State and Zip Code

stars@salterlaw.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Star Sansone

352

416-0416

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

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 FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Still No Pickles, LLC

(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:

2801 SW Archer Rd., Gainesville, FL 32608

Mailing Address:

2801 SW Archer Rd., Gainesville, FL 32608

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:

Star M. Sansone

Name

3940 NW 16th Blvd., Building B.

Florida street address (P.O. Box **NOT** acceptable)

Gainesville

FL

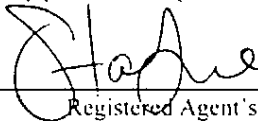
32605

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)

FILED
2024 JAN -3 PM 5:01
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

MGR

Orianna J. Snook
2801 SW Archer Rd., Gainesville, FL 32608

MGR

Ryan C. McGriff
2801 SW Archer Rd., Gainesville, FL 32608

(Use attachment if necessary)

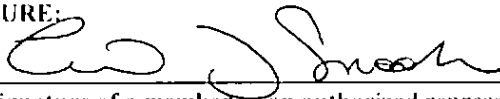
ARTICLE V: Effective date, if other than the date of filing: December 30, 2023 . (OPTIONAL)

(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:



Signature of a member or an authorized representative of a member.

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.

Orianna J. Snook

Typed or printed name of signer

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)

FILED
JAN 13 PM 5:17
SECRET
ALL INFORMATION CONTAINED HEREIN IS UNCLASSIFIED

Salter ■ Feiber

ATTORNEYS AT LAW

STAR M. SANSONE

L.L.M in Taxation

stars@salterlaw.net

December 29, 2023

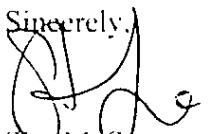
New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

Re: Articles of Organization of Still No Pickles, LLC
File Number: 20-0337.9 MH

Dear Sir or Madam:

Enclosed please find the Articles of Organization of the above mentioned entity, along with a personal check in the amount of \$125.00 for the filing fees. Once filed, please forward the documents to our office.

Sincerely,



Star M. Sansone

SMS:jg

FILED
77 JAN -3 PM 5:0
SECRET
TALLAHASSEE, FLORIDA