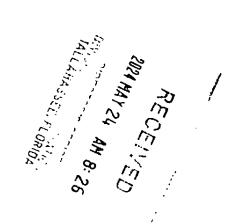
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(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	
(Document Number)	
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Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	Ì
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COVER LETTER

Division of Corporations
SUBJECT: Phil's Catering 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:
Phillip Bergeron
Phil's LLC.
Firm/Company
POBOX 145 Lady Lake FL. 32158
Addicas
Lady Lake FL. 32158
Lady Lake FL. 32158 phillipbergeron 50@gmail.com
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Phillip Bergeron 802 318-0097
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
□\$125.00 Filing Fee □\$130.00 Filing Fee & □\$155.00 Filing Fee & Certificate of Status

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TO:

New Filing Section

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

A	R	T	ŀ	C	L	E	I	_	N	a	m	e	:
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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:
Phillip Bergeren/Phil's LLC.	Phil's LLC. /Phillip Bergeren
1028 Ibises Court	POBOX 145
The Villages FL. 32162	Lady Lake FL. 32158
	

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:

Philip Bergeron

Name

1028 Ibises Court

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

The Villages FL 32162

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 (REOUIRED)

(CONTINUED)

ARTICLE IV-

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

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

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager AMBR	Phillip Bergeron 1028 Ibises Court The Villages FL. 32162
(Use attachment if necessary)	
an effective date is listed, the date must date of filing.)	be date of filing: May 24, 2024. (OPTIONAL) be specific and cannot be more than five business days prior to or 90 days after s not meet the applicable statutory filing requirements, this date will not be listed as truent of State's records.
TICLE VI: Other provisions, if any.	
This document is e I am aware that an	f a member or an authorized representative of a member. executed in accordance with section 605.0203 (1) (b), Florida Statutes. y false information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S. Typed or printed farme of signee
\$125.00 Filing Fee for Articles	Filing Fees: of Organization and Designation of Registered Agent

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