

L24000 378718

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

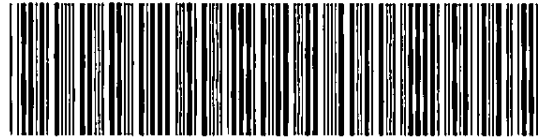
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# CAPITAL CONNECTION, INC.

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

SUNCOAST LIQUID NITROGEN LLC

Please Debit FCA000000003 For: 125.00

Thank you Seth Neeley



Signature

Requested by:

09/03/24

Name

Date

Time

Walk-In

Will Pick Up

1111 1111 1111 1111 1111 1111 1111 1111 1111 1111

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 \_\_\_\_\_

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**ARTICLES OF ORGANIZATION  
FOR  
SUNCOAST LIQUID NITROGEN, LLC**

**ARTICLE I - NAME**

The name of the limited liability company **SUNCOAST LIQUID NITROGEN, LLC.**

**ARTICLE II - ADDRESS**

The mailing address and the street address of the principal office of the company is **9773 FRUITVILLE RD., SARASOTA, FLORIDA 34240.**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE AND  
REGISTERED AGENT'S SIGNATURE**

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

**ERNEST J. KOPYSCINSKI  
9773 FRUITVILLE RD.  
SARASOTA FLORIDA 34240**

Having been named as registered agent and to accept service of process for the above stated limited liability company, 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 the Florida Statutes.

Signed by  
  
\_\_\_\_\_  
**ERNEST J. KOPYSCINSKI**

**ARTICLE IV - MANAGEMENT**

The business and affairs of the limited liability company shall be managed by:

**ERNEST J. KOPYSCINSKI  
9773 FRUITVILLE RD.  
SARASOTA FLORIDA 34240**

**ILDIKO TOTH  
9773 FRUITVILLE RD.  
SARASOTA FLORIDA 34240**

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The members are:

ERNEST J. KOPYSCINSKI  
9773 FRUITVILLE RD.  
SARASOTA FLORIDA 34240

ILDIKO TOTI  
9773 FRUITVILLE RD.  
SARASOTA FLORIDA 34240

ARTICLE V — LIMITATION ON AGENCY AUTHORITY OF MEMBERS:

No member of the company shall be an agent of the company solely by virtue of being a member.

Dated: 9/3/2024 \_\_\_\_\_

Signed by:  
*Ernest J. Kopyscinski*  
ERNEST J. KOPYSCINSKI

CLERK OF DISTRICT COURT  
TALLAHASSEE, FL

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