

624000410951

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

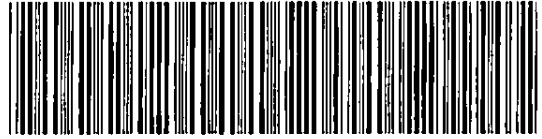
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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09/17/24--01029--029 **125.00

SEP 17 2024
FILING
CLERK

AS

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: MANATEE MUNCHIES, 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:

Joey A. Dobin

Name of Person

Firm/Company

1345 5th Ave. S.

Address

Naples, FL 34102

City/State and Zip Code

captjoeydcharters@yahoo.com

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

For further information concerning this matter, please call:

Joey A. Dobin

239

293-6451

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

SEP 17 PM 5:10
C

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MANATEE MUNCHIES, 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:

Mailing Address:

1345 5th Ave. S., Naples, FL 34102

5666 Whitaker Rd, Naples, FL 34112

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:

Joey A Dobin

Name

1345 5th Ave. S.

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

Naples

FL

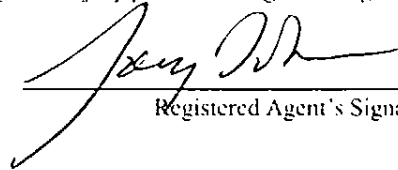
34102

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)

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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:

AMBR

Jason Gilbert
2280 21st ST SW
Naples, FL 34111

AMBR

Joey Dobin
5666 Whitaker Rd
Naples, FL 34112

AMBR

Dawn Csogi
5666 Whitaker Rd
Naples, FL 34112

(Use attachment if necessary)

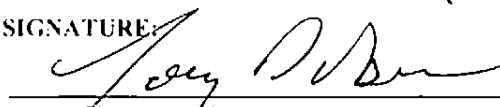
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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:



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.

Joey A Dobin

Typed or printed name of signee

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 17 2019
CLERK OF THE COURT
JAN 17 2019
CLERK OF THE COURT

This Document Prepared By:

Scott M. Ketchum, Esq.
Law Offices of Scott M. Ketchum, P.A.
9180 Galleria Ct., Suite 400
Naples, FL 34109

Release Affidavit

Before me, a Notary Public, this date appeared NATHAN C. MATSON ("Affiant"), to me well known, who being by me first duly sworn, deposes and says as follows:

1. Affiant formed Manatee Munchies LLC (the "Company") on June 24, 2023, which was assigned Document #1.23000304150.
2. Affiant dissolved the Company on June 25, 2024.
3. At all times from the formation of the Company until its dissolution, Affiant was the sole Manager and sole Member thereof.
4. Affiant has no intention to revoke the dissolution of the Company.
5. Affiant hereby immediately releases the name of the Company to Joey A. Dobin so that Mr. Dobin can proceed to form a new Florida limited liability company with the same name.

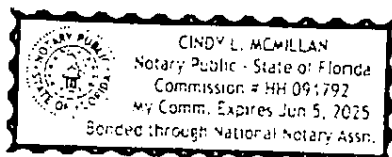
FURTHER AFFIANT SAYETH NAUGHT.


NATHAN C. MATSON

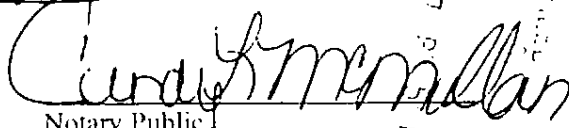
STATE OF FLORIDA

COUNTY OF COLLIER

SWORN AND SUBSCRIBED before me by means of [X] physical presence or [] online notarization, this 27 day of June 2024, before me, an officer duly qualified to take acknowledgements, personally appeared NATHAN C. MATSON, who is personally known to me.



(Notary Seal)


Notary Public
Print Name: Cindy L. McMillan
State of Florida at Large
My Commission Expires: 6/5/2025