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9-25-24

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(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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COVER LETTER

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

SUBJECT: Egghead Investments, 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:

Rodolfo Santa-Ana

Name of Person

Egghead Investments, LLC

Firm/Company

8400 SW 141st St.

Address

Palmetto Bay, FL 33158

City/State and Zip Code

santaana718@yahoo.com

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

For further information concerning this matter, please call:

Alvin Santa-Ana 786 499-3789

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

ARTICLE IV-

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

MGR/AMBR

Rodolfo Santa-Ana
8400 SW 141st St.
Palmetto Bay, FL 33158

MGR/AMBR

Rodolfo F. Santa-Ana, Jr.
1523 NW 80th Ave., Apt. F
Margate, FL 33063

MGR/AMBR

Alvin R. Santa-Ana
203 Sherwood Dr.
Bradenton, FL 34210

MGR/AMBR

Aixa C. Santa-Ana
2600 Lockwood Dr.
Winston Salem, NC 27103

(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:

Rodolfo Santa Ana

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.

Rodolfo Santa-Ana

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)

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