

L24000515357

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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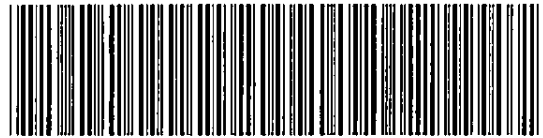
(Business Entity Name)

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LAW OFFICES OF
ROBERT B. FISHER, P.A.
Attorney and Counselor at Law
1220 Commerce Park Drive
Suite 207
Longwood, FL 32779
Telephone (407) 389-4529
Fax (407) 389-4532
Email: robertfisher@cfl.rr.com

*Robert B. Fisher

Florida Department of State
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

*Past President - Seminole County Bar Association
*Past Chairman Florida Bar Grievance Committee for Seminole County
*Past President - Central Florida Association of Criminal Defense Lawyers
*Board of Directors - Florida Association of Criminal Defense Lawyers (1998-2010, 2011-Present)
*AV Rated by Martindale Hubbell (Highest Rating possible)

To Whom It May Concern:

Please find enclosed our completed Articles of Organization for the formation of our Limited Liability Company Frog Fete, L.L.C. Along with the Articles, I have included a check for \$125.00 to cover the filing fee.

For any correspondence regarding this submission, please use the following email address: Robertfisherlaw@gmail.com.

Thank you for your attention to this matter. Please feel free to reach out if you have any questions or anything additional is needed.

Sincerely,



Beth Painter

Legal Assistant Robert B. Fisher, P.A.

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I-Name:

The name of the limited liability Company is:

Frog Fete, L.L.C.

ARTICLE II-Address

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address

1220 Commerce Park Drive, Suite 207
Longwood, Florida 32779

Mailing Address:

1220 Commerce Park Drive, Suite 207
Longwood, Florida 32779

ARTICLE III: Registered Agent, Registered Office, & Registered Agent's Signature:

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

Robert B. Fisher
1220 Commerce Park Drive, Suite 207
Longwood, Florida 32779

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.


11/21/24
Registered Agent's Signature

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(CONTINUED)

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

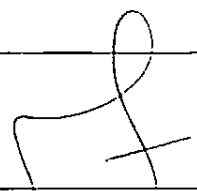
Nick Petrillo
7329 Bella Foresta Place
Sanford, Florida 32771

AMBR

Robert B. Fisher
1220 Commerce Park Drive
Suite 207
Longwood, Florida 32779

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

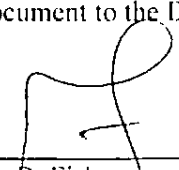
ARTICLE VI: Other Provisions, if any.

 11/21/24

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 in s.817.155, F.S.

 11/21/24

Robert B. Fisher

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