

(Requestor's Name)
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(City/State/Zip/Phone #)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:
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12/13/24--01923--013 **180.00

COVER LETTER

New Filing Section

Tallahassee, FL 32314

TO:

D	ivision of Cor	porations				
SHRIFCT	Miss Oluste	e Pageant LLC				
.yo oar.c.r	·	Nan	ne of Limi	ted Liabil	ty Company	
The enclose	ed Articles of (Organization and	fee(s) are:	submitted	for filing.	
Please retu	rn all correspo	ndence concernin	g this matt	er to the t	ollowing:	
	Patricia Aldo	us				
				Name of	Person	
				Firm/Co	mpany	
	314 SW Men	for Court		Time Co		
			-	Addı	288	
	Lake City, Fl	orida 32025				
ı	patti@cyclesco	rntral.com	Cit	y/State an	d Zip Code	
<u>-</u>	E	-mail address: (to	be used fi	or future a	nnual report notificati	on)
or further is	nformation cor	icerning this matte	er, please o	all:		
	Jennifer Freer	nan	386 at (292-2921)	
	Name	of Person			Daytime Telephone	
Enclosed is	a check for th	e following amou	វា!;			
□\$125.00	Filing Fee	■\$130,00 Filin Certificate of S		Certifi	5,00 Filing Fee & ed Copy al copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New Fi Divisio	2 Address ling Section n of Corporations 0x 0327			Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stree	issee

Tallahassee, FL 32303

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liab	ility Company is:			
Miss Olustee Page	ant, ELC ntain the words "Limited	Liability Company "	1 C " or "[1 C ")	
(Widst Cr	main one words. Enimeed	Elamity Company,		
ARTICLE II - Address:	on I Income Balancian Incident	er e a r iie . t r	haliffer of manager to	
The mailing address and street	adaress or the principal o	чисе от ще илишев и	парину Сотврану 18.	
Princ	ipal Office Address:		Mailing Address:	
314 SW Mentor C		314 <u>S</u>	V Mentor Ct	
lake City, Florida.	32025	Lake (ity, Florida 32025	
			<u>.</u>	
(The Limited Liability Compa another business entity with a The name and the Florida stre	n active Florida registratio	on.)	na masi designate an marvio	uaren
		Name		
	314 SW Mentor Ct			
		s (P.O. Box <u>NOT</u> acc	eptable)	
	Lake City	Florida	32025	
	City	State	Zip	
laving been named as registere blace designated in this certifica in the certifica in the agree to comply with the im familiar with and accept the	te, I hereby accept the app provisions of all statutes r	ointment as registered elating to the proper o	agent and agree to act in thi nd complete performance of	is capacity. I my duties, and I
	Regist	ered Agent's Signatu	e (REQUIRED)	
		(CONTINUED)		

;

ARTICLE IV-

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

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
-	
AMBR	Jennifer Freeman 172 SE Sandia Way
	Lake City, Florida 32025
AMBR	Dawn Ripplinger
AVIETA	9972 SW 151st Place
	Lake Butler, Florida 32054
AMBR	Patricia Aldous
	314 SW Mentor Ct,
	LakeCity, Florida 32025
	- B
(Use attachment if necessary)	
ective date is listed, the date must be sp of filing.)	e of tiling: <u>January 1, 2025</u> . (OPTIONAL) pecific and cannot be more than five business days prior to or 90 day
Tective date is listed, the date must be sport filing.) If the date inserted in this block does not	pecific and cannot be more than five business days prior to or 90 day meet the applicable statutory filing requirements, this date will not be
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\$ 5.00 Certificate of Status (Optional)

ELECTRONIC ARTICLES OF ORGANIZATION

FOR

FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

The name of the Limited Liability Company is:

Miss Olustee Pageant, LLC

ARTICLE II

The mailing address of the Limited Liability Company is

314 SW Mentor Ct.

Lake City, Florida 32025

ARTICLE III

The purpose for which this Limited Liability Company is organized is

ANY AND ALL LAWFUL BUSINESS

ARTICLE IV

The name and street address of the registered agent is:

John G. Aldous

314 SW Mentor Ct.

Lake City, Florida 32025

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 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.

Registered Agent Signature:

<u>Jo</u>hń G. Aldous

ARTICLE V

The name and address of managing members/managers are:

Jennifer Freeman

172 SE Sandia Way

Lake City, Florida 32025

Dawn Ripplinger

9972 SW 151st Place

Lake Butler, Florida 32054

Patricia Aldous

314 SW Mentor Court

Lake City, Florida 32025