

M21000013181

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850)617-6383

From:
Account Name : CLARK PARTINGTON
Account Number : I20140000059
Phone : (850)650-3304
Fax Number : (850)650-3305

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: cbird@dillarddoor.com

**Foreign Limited Liability Company
Lido Holdings, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	04
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2021 OCT -6 PM 1:55

TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FL

2021 OCT -6 AM 10:45

FILED

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APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 605.0902, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1. Lido Holdings, LLC
(Name of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
- (If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida. The alternate name must include "Limited Liability Company," "L.L.C.," or "LLC.")
2. Tennessee Revised Limited Liability Company Act
(Jurisdiction under the law of which foreign limited liability company is organized)
3. 87-2778528
(FEI number, if applicable)
4. October 6, 2021
(Date first transacted business in Florida, if prior to registration.
(See sections 605.0904 & 605.0905, F.S. to determine penalty liability))
5. 788 East Street
(Street Address of Principal Office)
6. 788 East Street
(Mailing Address)
- Memphis, TN 38104
- Memphis, TN 38104

7. Name and street address of Florida registered agent: (P.O. Box NOT acceptable)

Name: Scott Campbell

Office Address: Clark Partington - 4100 Legendary Drive, Ste. 200

Destin, Florida 32541
(City) (Zip code)

Registered agent's acceptance:

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 application, 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 relative 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's signature)

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 TALLAHASSEE, FL

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8. For initial indexing purposes, list names, title or capacity and addresses of the primary members/managers or persons authorized to manage [up to six (6) total]:

<u>Title or Capacity:</u>	<u>Name and Address:</u>	<u>Title or Capacity:</u>	<u>Name and Address:</u>
<input checked="" type="checkbox"/> Manager	Name: Chris Bird	<input type="checkbox"/> Manager	Name: Chris Bird
<input type="checkbox"/> Member	Address: 788 East Street	<input checked="" type="checkbox"/> Member	Address: 788 East Street
<input type="checkbox"/> Authorized	Memphis, TN 38104	<input type="checkbox"/> Authorized	Memphis, TN 38104
Person		Person	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other
<input type="checkbox"/> Manager	Name: Helen Bird	<input type="checkbox"/> Manager	Name:
<input checked="" type="checkbox"/> Member	Address: 788 East Street	<input type="checkbox"/> Member	Address:
<input type="checkbox"/> Authorized	Memphis, TN 38104	<input type="checkbox"/> Authorized	
Person		Person	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other
<input type="checkbox"/> Manager	Name:	<input type="checkbox"/> Manager	Name:
<input type="checkbox"/> Member	Address:	<input type="checkbox"/> Member	Address:
<input type="checkbox"/> Authorized		<input type="checkbox"/> Authorized	
Person		Person	
<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other	<input type="checkbox"/> Other

Important Notice: Use an attachment to report more than six (6). The attachment will be imaged for reporting purposes only. Non-indexed individuals may be added to the index when filing your Florida Department of State Annual Report form.

9. Attached is a certificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in the jurisdiction under the law of which it is organized. (If the certificate is in a foreign language, a translation of the certificate under oath of the translator must be submitted)

10. 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.

Chris Bird

Signature of an authorized person

Chris Bird

Typed or printed name of signer

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Tre Hargett
Secretary of State

Division of Business Services**Department of State****State of Tennessee**312 Rosa L. Parks AVE, 6th FL
Nashville, TN 37243-1102

Lido Holdings, LLC
788 EAST ST
MEMPHIS, TN 38104-6013

September 27, 2021

Filing Acknowledgment

Please review the filing information below and notify our office immediately of any discrepancies.

SOS Control # :	001241689	Formation Locale:	TENNESSEE
Filing Type:	Limited Liability Company - Domestic	Date Formed:	09/24/2021
Filing Date:	09/24/2021 1:49 PM	Fiscal Year Close:	12
Status:	Active	Annual Report Due:	04/01/2022
Duration Term:	Perpetual	Image # :	B1094-5000
Managed By:	Manager Managed		
Business County:	SHELBY COUNTY		

Document Receipt

Receipt # :	006644192	Filing Fee:	\$300.00
Payment-Check/MO -	LEWIS, THOMASON, KING, KRIEG & WALDROP, P.C., MEMPHIS, TN		\$300.00

Registered Agent Address:
CHRIS BIRD
788 EAST ST
MEMPHIS, TN 38104-6013

Principal Address:
788 EAST ST
MEMPHIS, TN 38104-6013

Congratulations on the successful filing of your **Articles of Organization** for **Lido Holdings, LLC** in the State of Tennessee which is effective on the date shown above. You must also file this document in the office of the Register of Deeds in the county where the entity has its principal office if such principal office is in Tennessee. Please visit the Tennessee Department of Revenue website (www.tn.gov/revenue) to determine your online tax registration requirements. If you need to obtain a Certificate of Existence for this entity, you can request, pay for, and receive it from our website.

You must file an Annual Report with this office on or before the Annual Report Due Date noted above and maintain a Registered Office and Registered Agent. Failure to do so will subject the business to Administrative Dissolution/Revocation.

Processed By: Jayme Murphy


Tre Hargett
Secretary of State

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