PEORE DIOURS

(Requestor's Name)
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CAPITAL CONNECTION, INC.

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MESSY PIZZA LLO	C		<u></u>			
Please Debit FCA000	0000003 For: ¹	25			2025 7.13 20	.3
Thank you Seth Nee	ley				1 2	.,
Staf				Art of Inc. File	(n)	
				LTD Partnership File	• •	محفد
				Foreign Corp. File	— : 👸 着	
				L.C. File		
				Fictitious Name File		
				Trade/Service Mark		
				Merger File		
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			—	RA Resignation		
				Dissolution / Withdrawal		
				Annual Report / Reinstatement		
				Cert. Copy		•
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				Certificate of Good Standing		
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			<u> </u>	Corp Record Search		
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Requested by:				UCC 1 or 3 File		
Name	Date	Time		UCC 11 Search		
Walk-In		·		UCC 11 Retrieval		

COVER LETTER

TO:	New Filing S Division of C						
SUBJEC	C7181	PIZZA LLC					
30031.	CI	Ni	ime of Limit	ed Liabili	ty Company		
The encl	osed Articles o	f Organization and	d fee(s) are s	ubmitted	for filing.		2.025
Please re	eturn all corresp	ondence concerni	ng this matte	r to the fe	ollowing:		ست . آران مقر ،
	EVAN R N	IARBIN, ESQ.					. (2 . (3)
				Name of	Person		itt.
	EVAN R N	IARBIN & ASSO	CIATES PA				
		·		Firm/Cor	ipany		
	19790 WES	ST DIXIE HWY, I	°H3				
				Addre	SS		
	MIAMI, FL	. 33180					
	SM@3MLA	W.NET	City	State and	Zip Code		
			be used for	future an	nual report notifica	tion)	
For further	information co	neerning this matt	er, please ca	lt:			
	EVAN R M	ARBIN	305 at ()	4964040		
	Nan	e of Person			Daytime Telephor	ne Number	
Enclosed	is a check for t	he following amou	int:				
	0 Filing Fee	□\$130,00 Filin Certificate of St	g Fee & tatus	Certified	00 Filing Fee & Copy copy is enclosed)	□\$160.00 Fi Certificate of Certified Cop (additional copy	Status &
	New Fi Divisio P.O. Bo	g Address ling Section in of Corporations ox 6327 issee, FL 32314		No T1 24	reet Address w Filing Section Di te Centre of Tallaha 15 N. Montoe Stre	issee et, Suite 810	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must	LLC			
	contain the words "Limited	Liability Company,	"L.L.C.," or "LLC.")	<u>-</u>
TICLE II - Address:				
mailing address and str	eet address of the principal c	office of the Lamited	Liability Company is:	
<u>Pri</u>	ncipal Office Address:		Mailing Address:	
7292 VALENCI	A DRIVE	729	2 VALENCIA DRIVE	· .
1100	131 31/113	PO	A RATON, FL 33433	
BOCA RATON	11. 33433		. A RATON, PL 33433	
TICLE III - Registered	Agent, Registered Office,	& Registered Agen		ial or
FICLE III - Registered a Limited Liability Comp her business entity with	Agent, Registered Office, pany cannot serve as its own an active Florida registration eet address of the registered	& Registered Agent.	it's Signature:	ual or
FICLE III - Registered a Limited Liability Comp her business entity with	Agent, Registered Office, pany cannot serve as its own an active Florida registratio	& Registered Agent.	it's Signature:	ual or
FICLE III - Registered a Limited Liability Comp her business entity with	Agent, Registered Office, pany cannot serve as its own an active Florida registration eet address of the registered	& Registered Agent, 'on.) d agent are: Name	it's Signature:	ual or
FICLE III - Registered a Limited Liability Comp her business entity with	Agent, Registered Office, pany cannot serve as its own an active Florida registratio eet address of the registered EVAN R MARBIN	& Registered Agent. (a Registered Agent. (a) and (a) agent are: Name HWY, PH3	at's Signature: r'ou must designate an individu	ual or
FICLE III - Registered a Limited Liability Comp her business entity with	Agent, Registered Office, pany cannot serve as its own an active Florida registratio eet address of the registered EVAN R MARBIN 19790 WEST DIXIE	& Registered Agent. (a Registered Agent. (a) and (a) agent are: Name HWY, PH3	at's Signature: r'ou must designate an individu	aal or

Hplace 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 posseon as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IVThe name and address of each person authorized to manage and control the Limited Liability Company: Title: "AMBR" = Authorized Member "MGR" = Manager MGR STEVEN SAGER 7292 VALENCIA DRIVE BRUCA RATON, FL 33433 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filling: (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

ARTICLE VI: Other provisions, if any.

REOURED 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 \$.817.155, F.S.

EVAN R MARBIN

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)

the document's effective date on the Department of State's records.