H25000036427 3

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

L25000037856

1/31/25

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H25000036427 3)))

H25000036427 3BC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : DAVID C. HASTINGS, CPA, PA
Account Number : I20000000168
Phone : (727)322-0909
Fax Number : (727)610-8595

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

Email Address: SHARON HUNT 1@YAHOO.COM

RECEIVED
2025 JAN 30 PM 12:42

FILED
25 JAN 30 PM 5:59

FLORIDA LIMITED LIABILITY CO.

SHARON HUNT, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	$130.00

MS

Electronic Filing Menu Corporate Filing Menu Help

H25000036427 3

H25000036427 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:
The name of the Limited Liability Company is:

SHARON HUNT, LLC
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC ")

ARTICLE II - Address:
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	**Mailing Address:**
8230 30TH AVE N	SAME
ST PETERSBURG, FL 33710	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

DAVID C HASTINGS
Name

2207 54TH ST S
Florida street address (P.O. Box **NOT** acceptable)

GULFPORT	FL	33707
City	State	Zip

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
25 JAN 30 PM 5:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H25000036427 3

H25000036427 3

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	SHARON HUNT 8230 30TH AVE N ST PETERSBURG, FL 33710

(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:

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.

SHARON HUNT
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)

FILED
25 JAN 30 PM 5:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H25000036427 3