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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

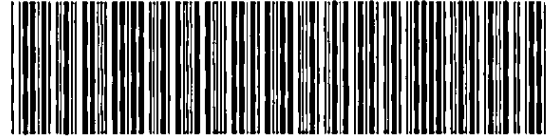
(Business Entity Name)

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Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

14564 LAUREL TRAIL, LLC

Signature \_\_\_\_\_

Requested by: BA

12/11

Name \_\_\_\_\_

Date \_\_\_\_\_

Time \_\_\_\_\_

Walk-In \_\_\_\_\_

Will Pick Up \_\_\_\_\_

- \_\_\_\_\_ Art of Inc. File \_\_\_\_\_
- \_\_\_\_\_ LTD Partnership File \_\_\_\_\_
- \_\_\_\_\_ Foreign Corp. File \_\_\_\_\_
- L.C. File \_\_\_\_\_
- \_\_\_\_\_ Fictitious Name File \_\_\_\_\_
- \_\_\_\_\_ Trade/Service Mark \_\_\_\_\_
- \_\_\_\_\_ Merger File \_\_\_\_\_
- \_\_\_\_\_ Art. of Amend. File \_\_\_\_\_
- \_\_\_\_\_ RA Resignation \_\_\_\_\_
- \_\_\_\_\_ Dissolution / Withdrawal \_\_\_\_\_
- \_\_\_\_\_ Annual Report / Reinstatement \_\_\_\_\_
- \_\_\_\_\_ Cert. Copy \_\_\_\_\_
- Photo Copy \_\_\_\_\_
- \_\_\_\_\_ Certificate of Good Standing \_\_\_\_\_
- \_\_\_\_\_ Certificate of Status \_\_\_\_\_
- \_\_\_\_\_ Certificate of Fictitious Name \_\_\_\_\_
- \_\_\_\_\_ Corp Record Search \_\_\_\_\_
- \_\_\_\_\_ Officer Search \_\_\_\_\_
- \_\_\_\_\_ Fictitious Search \_\_\_\_\_
- \_\_\_\_\_ Fictitious Owner Search \_\_\_\_\_
- \_\_\_\_\_ Vehicle Search \_\_\_\_\_
- \_\_\_\_\_ Driving Record \_\_\_\_\_
- \_\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_
- \_\_\_\_\_ UCC 11 Search \_\_\_\_\_
- \_\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_
- \_\_\_\_\_ Courier \_\_\_\_\_

**ARTICLES OF ORGANIZATION  
FOR**

**14564 Laurel Trail, LLC**

The undersigned, for the purpose of forming a company under the Florida Limited Liability Act, hereby adopts the following Articles of Organization.

**ARTICLE I: NAME**

The name of the company is **14564 Laurel Trail, LLC**

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**ARTICLE II: PRINCIPAL OFFICE**

The principal office of the company is **840 US Highway One, Suite 345, North Palm Beach, FL 33408-3834**

### **ARTICLE III: INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent is **Wyant-Cortez & Cortez, Chartered, 840 US Highway One, Suite 345, North Palm Beach, FL 33408-3834**

### **ARTICLE V: AUTHORIZED MEMBER**

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

**Michael J. Dominguez, Authorized Member, 840 US Highway One, Suite 345, North Palm Beach, FL 33408-3834**

**The undersigned has executed these Articles of Organization for filing purposes this 11<sup>th</sup> day of December 2020.**

**/S/ Larry T. Cortez as Authorized Representative for 14564 Laurel Trail, LLC**

\_\_\_\_\_  
**Authorized Representative**

