L21000319369

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone #	f)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	·)
(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	

Office Use Only



200369056182

\$200000 12 88 1004 \$200000 174 \$7ATE

2021 JUL 12 FH 3:51

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 REFERENCE: 900851 8322602 AUTHORIZATION : ORDER DATE: July 12, 2021 ORDER TIME : 2:24 PM ORDER NO. : 900851-005 CUSTOMER NO: 8322602 DOMESTIC FILING NAME: PARK TEN OAKS COMMUNITY, LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION __ CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX CERTIFIED COPY _ PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Alexxis Weiland - EXT.

EXAMINER'S INITIALS:

COVER LETTER

	ew Filing Section ivision of Corporations			
SUBJECT	PARK TEN OAKS COMMU	NITY, LLC		
SOBJECT	Nam	e of Limited Liabi	lity Company	
The enclos	ed Articles of Organization and f	ee(s) are submitte	d for filing.	
Please retu	m all correspondence concerning	this matter to the	following:	
	Carlos E. Gonzalez			
		Name o	f Person	
	AHS Residential, LLC			
		Firm/C	ompany	
	12895 SW 132nd St			
		Add	ress	
	Miami, FL 33186			
		City/State as	nd Zip Code	
-	cmerino@ahsresidential.com	and for figure	annual report notificat	io-)
	•		annual report notificat	ion)
For further in	nformation concerning this matter	, please call:		
	Carlos E. Gonzalez	305 at (255-5527 _)	
	Name of Person		Daytime Telephon	e Number
Enclosed is	a check for the following amoun	t:		
	Filing Fee	Fee & S15	is 5.00 Filing Fee & ied Copy is enclosed)	■\$160.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address		Street Address	
	New Filing Section Division of Corporations		New Filing Section D. The Centre of Tallah	
	P.O. Box 6327		2415 N. Monroe Street, Suite 810	
	Tallahassee, FL 32314		Tallahassee, FL 3230	3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	COMMUNITY, LLC	<u> </u>		
(Must con	atin the words "Limited I	Liability Company, '	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street a	uddress of the principal of	ffice of the Limited	Liability Company is:	
<u>Princip</u>	oal Office Address:		Mailing Address:	
12895 SW 132nd St		1289	5 SW 132nd St	
Miami, FL 33186		Mian	ni, FL 33186	
ARTICLE III. D. Jan. 14	4 P 14 10 T			- - -
another business entity with an	y cannot serve as its own active Florida registration	Registered Agent. Y n.)	t's Signature: 'ou must designate an individual or	SECTION SECTION
(The Limited Liability Company	y cannot serve as its own active Florida registration address of the registered	Registered Agent. Yn.) agent are:	t's Signature: 'ou must designate an individual or	2011 TOP 12
(The Limited Liability Company another business entity with an	y cannot serve as its own active Florida registration	Registered Agent. Y n.) agent are: Company	t's Signature: 'ou must designate an individual or	
(The Limited Liability Company another business entity with an	y cannot serve as its own active Florida registration address of the registered	Registered Agent. Yn.) agent are:	t's Signature: 'ou must designate an individual or	
(The Limited Liability Company another business entity with an	y cannot serve as its own active Florida registration address of the registered	Registered Agent. Y n.) agent are: Company	t's Signature: 'ou must designate an individual or	
(The Limited Liability Company another business entity with an	y cannot serve as its own active Florida registration address of the registered Corporation Service C	Registered Agent. Yn.) agent are: Company Name	ou must designate an individual or	
(The Limited Liability Company another business entity with an	cannot serve as its own active Florida registration address of the registered Corporation Service C	Registered Agent. Yn.) agent are: Company Name	ou must designate an individual or	A STATE OF THE STA

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..

Corporation Service Company

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
<u>MGR</u>	Ernesto Lopes 12895 SW 132nd St Miami, FL 33186
<u>AR</u>	Carlos E. Gonzalez 12895 SW 132nd St Miami, FL 33186
AR	Osvaldo J. Marchante 12895 SW 132nd St Miami, FL 33186
AR	Ricardo Blas 12895 SW 132nd St Miami, FL 33186
(Use attachment if necessary)	
effective date is listed, the date must be sate of filing.)	te of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 days at meet the applicable statutory filing requirements, this date will not be list at of State's records.
CLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	AH-2

Signature of a member or an authorized representative of a member. This document is executed in apportunity 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.

Carlos E. Gonzalez
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)