L21000327476

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PICK-UP WAIT MAIL
(Business Entity Name)
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2001 JUL 16 PH 3: 46

CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195

REFERENCE: 909213 814495

AUTHORIZATION :

COST LIMIT : \$ 160.000

ORDER DATE : July 16, 2021

ORDER TIME : 2:45 PM

ORDER NO. : 909213-015

CUSTOMER NO: 8144954

DOMESTIC FILING

NAME: 15701 NW 127 AVE INDUSTRIAL

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

XX ___ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland - EXT.

	COVER LETTER	
	Filing Section sion of Corporations	
SUBJECT:	15701 NW 127 AVE INDUSTRIAL LLC	
SUBJECT:	Name of Limited Liability Con	mpany
The enclosed	Articles of Organization and fee(s) are submitted for fil	ing.
Please return	all correspondence concerning this matter to the following	ng:
1	tichard J. Green	
-	Name of Person	1
•	Criterion Group LLC	
_	Firm/Company	
:	8-18 Steinway Street	
-	Address	
	storia, NY 11103	
_	City/State and Zip (Code
ri.	h@criteriongroup.com	
	E-mail address: (to be used for future annual	report notification)
For further inf	rmation concerning this matter, please call:	
R	chard J. Green 202 459	1764
_		rtime Telephone Number
Enclosed is a	check for the following amount:	
□\$125.00 F	ling Fee □\$130.00 Filing Fee & □\$155.00 Fi Certificate of Status Certified Cop (additional copy	y Certificate of Status &

Mailing Address
New Filing Section Division of Corporations

Street Address New Filing Section Division The Centre of Tallahassee

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

2021 JUL 16	PH	} :	48
SECRETAILY: TALLAHAS			

157	01	NW	127	AVE	INDU:	STRE	ΑL	LLC
137	UI	NW	127	AVE	INDU:	21KI	ΑL	LLC

(Must conatin 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:

<u>Principa</u>	Principal Office Address:		Mailing Address:		
28-18 Steinway Street			28-18 Steinway Street		
Astoria, NY 11103			Astoria, NY 11103		
RTICLE III - Registered Age The Limited Liability Company nother business entity with an a the name and the Florida street a	cannot serve as its own ctive Florida registratio	Registered Agon.) I agent are:	Agent's Signature: ent. You must designate an individual or		
		Name			
	1201 Hays Street				
	Florida street address	s (P.O. Box <u>N(</u>	IT acceptable)		
	Tallahassee	Fl.	32301		
	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..

Corporation Service Company

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
AMBR	Pads Property Holdings LLC
	28-18 Steinway Street Astoria, NY 11103
	7.550 mg (** 1.110.7
	
	(/) No
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	PH (200)
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415- w 1 - 20	3: 46 SIAT FL
(Use attachment if necessary)	, <u>H</u> e
ARTICLE V: Effective date, if other than the date of	filing: (OPTIONAL)
If an effective date is listed, the date must be speci	fic and cannot be more than five business days prior to or 90 days after
he date of filing.)	ne and cannot be more than five business days prior to or 90 days after
	et 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:	ACIO
	12/-
Signature of a memb	per 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.

Richard J. Green, Authorized Representative

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)

S 5.00 Certificate of Status (Optional)