

L21000 355684

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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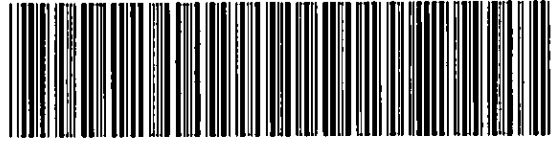
(Business Entity Name)

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TALLAHASSEE, FL 32301
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Date: **August 06, 2021**

Account#: I200000000088

Name: **James Brodbeck**

Reference #: **1448871**

Entity Name: **BaCor Goodman LLC**

☒ Articles of Incorporation/Authorization to Transact Business

☐ Amendment

☐ Change of Agent

☐ Reinstatement

☐ Conversion

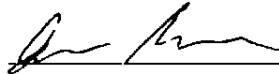
☐ Merger

☐ Dissolution/Withdrawal

☐ Fictitious Name

☒ Other **Certified Copy**

Authorized Amount: **\$155.00**

Signature: 

**ARTICLES OF ORGANIZATION
OF
BACOR GOODMAN LLC**

ARTICLE I: - Name

The name of the Limited Liability Company is:

BaCor Goodman LLC

ARTICLE II: - Address

The mailing address and street address of the principal office of the Limited Liability Company are:

**1050 Kane Concourse
Bay Harbor Islands, Florida 33154**

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature

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

**Cogency Global Inc.
115 North Calhoun Street
Suite 4
Tallahassee, Florida 32301**

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.

Cogency Global Inc., Registered Agent

By: /s/ Eric Hood
Name: Eric Hood
Title: Assistant Secretary

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ARTICLE IV: - Management

The name and address of the member authorized to manage and control the Limited Liability Company is:

<u>Title</u>	<u>Name and Address</u>
AMBR	Ambienta Developers, LLC 16001 Collins Avenue #2901 Sunny Isles, Florida 33160

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization on August 5th, 2021.

/s/Claudio P. Cordero Tabach
Claudio P. Cordero Tabach, Authorized Signer

(In accordance with section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 Section 817.155, Florida Statutes.)

Claudio P. Cordero Tabach
Typed or printed name of signee