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	vision of Cor				
SUBJECTS		Rentals, LLC			
SUBJECT	· .	Name of L	imited Liabili	у Сотрапу	
The enclose	ed Articles of (Organization and fee(s)	are submitted	for filing.	
Please retur	n all correspo	ndence concerning this r	natter to the fo	ollowing:	
	Howard P. R	oss, Esq., B.C.S.			
	<u> </u>		Name of l	Person	
	Battaglia, Ro	ss, Dicus and McQuaid,	P.A.		
		-	Firm/Cor	npany	_
	5858 Central	Ave., Suite A			
			Addre	SS	
	St. Petersburg	g, FL 33707			
i	łross@brdwla	aw.com	City/State and	Zip Code	
_	Е	-mail address: (to be use	ed for future ar	nual report notificat	ion)
For further in	formation cor	ncerning this matter, plea	ise call:		
	Howard P. Re		727	381-2300	
	Name		Area Code	Daytime Telephor	ne Number
Enclosed is	a check for th	e following amount:			
■\$125.00	Filing Fee	□\$130.00 Filing Fee Certificate of Status	Certifie	.00 Filing Fee & d Copy to copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	ntals, LLC		41.000 011.000
(Mu	st contain the words "Limited Lia	bility Company, "	L.L.C., or "LLC.")
ARTICLE II - Address: The mailing address and s	treet address of the principal offic	re of the Limited 1	Liability Company is:
<u> P</u>	rincipal Office Address:		Mailing Address:
6202 60th Ave	e. N.	6202	60th Ave. N.
OZOZ OUBLAN			
St. Petersburg ARTICLE III - Register The Limited Liability Counother business entity w	ed Agent, Registered Office, &	Registered Agen	etersburg, FL 33709 t's Signature: You must designate an individual or
St. Petersburg ARTICLE III - Register (The Limited Liability Coanother business entity w	ed Agent, Registered Office, & Impany cannot serve as its own Reith an active Florida registration.) street address of the registered ag	Registered Agen gistered Agent. Y	t's Signature:
St. Petersburg ARTICLE III - Register (The Limited Liability Co another business entity w	ed Agent, Registered Office, & Impany cannot serve as its own Reith an active Florida registration.) street address of the registered ag Resident Agent Corpora	Registered Agen gistered Agent. Y	t's Signature:
St. Petersburg ARTICLE III - Register (The Limited Liability Co another business entity w	ed Agent, Registered Office, & Impany cannot serve as its own Reith an active Florida registration.) street address of the registered ag Resident Agent Corpora	Registered Agent Segistered Agent Sent are:	t's Signature:
St. Petersburg ARTICLE III - Register (The Limited Liability Co another business entity w	ed Agent, Registered Office, & Impany cannot serve as its own Reith an active Florida registration.) street address of the registered agent Resident Agent Corpora	Registered Agent Segistered Agent Sent are: ation of Pinellas lame	t's Signature: 'ou must designate an individual or
St. Petersburg ARTICLE III - Register (The Limited Liability Co another business entity w	ed Agent, Registered Office, & Impany cannot serve as its own Reith an active Florida registration.) street address of the registered ag Resident Agent Corpora	Registered Agent Segistered Agent Sent are: ation of Pinellas lame	t's Signature: 'ou must designate an individual or

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	Elisabeth Ackerman 4560 45th Street S. St. Petersburg, FL 33711
MGR	Jake Ackerman 6202 60th Ave. N. St. Petersburg, FL 33709
EV: Effective date, if other than the datective date is listed, the date must be sof filing.)	te of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90
EV: Effective date, if other than the datective date is listed, the date must be sof filing.) the date inserted in this block does not ment's effective date on the Department.	pecific and cannot be more than five business days prior to or 90 meet the applicable statutory filing requirements, this date will not
E V: Effective date, if other than the date ective date is listed, the date must be sof filing.) The date inserted in this block does not ment's effective date on the Department E VI: Other provisions, if any.	pecific and cannot be more than five business days prior to or 90 meet the applicable statutory filing requirements, this date will not
rective date is listed, the date must be so of filing.) If the date inserted in this block does not ment's effective date on the Department. E VI: Other provisions, if any. REQUIRED SIGNATURE:	meet the applicable statutory filing requirements, this date will not at of State's records.
LE V: Effective date, if other than the date fective date is listed, the date must be so of filing.) If the date inserted in this block does not ument's effective date on the Department. E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a material of the department of the date of the dat	meet the applicable statutory filing requirements, this date will not at of State's records. The meet the applicable statutory filing requirements, this date will not at of State's records. The meet the applicable statutory filing requirements, this date will not at of State's records. The meet the applicable statutory filing requirements, this date will not at of State's records. The meet the applicable statutory filing requirements, this date will not at of State's records.
LE V: Effective date, if other than the date fective date is listed, the date must be so of filing.) If the date inserted in this block does not ument's effective date on the Department. E VI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a material of the department of the date of the dat	meet the applicable statutory filing requirements, this date will not at of State's records. Lead of State's records. Lead of State's records. Deember or an authorized representative of a member. Lead of the section 605.0203 (1) (b), Florida Statutes. See information submitted in a document to the Department of State