L230000 31815

(Requestor's Name)
(Address)
(Address)
(188.888)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(D. Grand Falin Mars)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status

Special Instructions to Filing Officer:

Office Use Only



100399920511

S. CHATHAM 5. JAN L. N. 2023 14 01/24/23--01004--018 ••500.00

RECEIVED
2023 JAN 24 AM II: 36
SECRELAREDE STATE
SECRELAREDE STATE



· CORPORATE ACCESS,

When you need ACCESS to the world

•	_	\sim	_	
		T	N T	
			1	C.

6.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

ı		W	ALK IN	
	Pl	CK UP:	MISTY 1/24	
· XX	CERTIFIED COPY PHOTOCOPY CUS			
XX	FILING	LLC		
1. 2.	E&R 62 LLC (CORPORATE NAME AND DO	CUMENT #)		
	(CORPORATE NAME AND DO	CUMENT #)		
3.	(CORPORATE NAME AND DO	CUMENT #)		
4.	(CORPORATE NAME AND DO	CUMENT #)		
5.	(CORPORATE NAME AND DO	CUMENT #)		
6.	(CORPORATE NAME AND DO	CUMENT #)		
SPECIA INSTRU	L UCTIONS:			
	_			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liabilit	y Company is:			
E&R 62 LLC	 			
(Must cont	ain the words "Limited	Liability Cor	npany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street ad	ddress of the principal (office of the L	imited Liability Company is:	
<u>Princip</u>	al Office Address:		Mailing Address:	
2401 S.Ocean DR A	pt 1207		2401 S.Ocean DR Apt 1207	
Hollywood FL 33019)		Hollywood FL 33019	
				> = 88
(The Limited Liability Company another business entity with an a The name and the Florida street a	etive Florida registration	on.) d agent are:	agent. You must designate an individual or	JAN 24 PH 4-36
		Name		
	2401 S.Ocean DR A	pt 1207		
	Florida street addres	s (P.O. Box	NOT acceptable)	
	Hollywood	FL	33019	
	City	State	Zip	
olace designated in this certificate, further agree to comply with the pr	I hereby accept the app ovisions of all statutes r ligations of my position /S/ Emiliya Mirl	ointment as re elating to the as registered kina	for the above stated limited liability compargistered agent and agree to act in this cape proper and complete performance of my duagent as provided for in Chapter 605, F.S Signature (REQUIRED)	acity, 1 ities, and I
		(CONTIN	UED)	

<u>Title:</u>		Name and Address:
	authorized Member	
'MGR" = Ma		CRAMINO ANICANA
<u>AMBR</u>		ERAM HOLDING LLC.
		2401 S.Ocean DR Apt 1207
		Hollywood FL 33019
		i_{s}
		<u> </u>
		+ "
		<u></u>
		
		ر
		
V: Effective	ent if necessary) e date, if other than the date listed, the date must be sp	of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 90 o
EV: Effective date is I filing.) the date insertion date insertion of the date insertion	e date, if other than the date listed, the date must be sp	secific and cannot be more than five business days prior to or 90 of the applicable statutory filing requirements, this date will not be
EV: Effective ctive date is I f filing.) the date insert nent's effective EVI: Other pr	e date, if other than the date listed, the date must be spoted in this block does not reve date on the Department rovisions, if any. SIGNATURE:	neet the applicable statutory filing requirements, this date will not to of State's records.
EV: Effective ettive date is I f filing.) he date insert ent's effective EVI: Other pr	e date, if other than the date listed, the date must be spoted in this block does not reve date on the Department rovisions, if any. SIGNATURE:	secific and cannot be more than five business days prior to or 90 of the applicable statutory filing requirements, this date will not be
CV: Effective ettive date is I f filing.) he date insert eent's effective CVI: Other pr	e date, if other than the date listed, the date must be spated in this block does not reve date on the Department rovisions, if any. SIGNATURE: /S/ E Signature of a me	ecific and cannot be more than five business days prior to or 90 of meet the applicable statutory filing requirements, this date will not be of State's records. Emiliya Mirkina
CV: Effective ettive date is I f filing.) he date insert eent's effective CVI: Other pr	e date, if other than the date listed, the date must be spoted in this block does not reve date on the Department rovisions, if any. SIGNATURE: /S/ E Signature of a me This document is execut	ecific and cannot be more than five business days prior to or 90 of meet the applicable statutory filing requirements, this date will not be of State's records. Emiliya Mirkina Ember or an authorized representative of a member. ted in accordance with section 605.0203 (1) (b), Florida Statutes.
V: Effective ettive date is l filing.) he date insert ent's effective VI: Other pr	e date, if other than the date listed, the date must be spoted in this block does not reve date on the Department rovisions, if any. SIGNATURE: /S/ E Signature of a me This document is execut I am aware that any false	emiliya Mirkina ember or an authorized representative of a member. ted in accordance with section 605.0203 (1) (b), Florida Statutes. en information submitted in a document to the Department of State
V: Effective ettive date is l filing.) he date insert ent's effective VI: Other pr	e date, if other than the date listed, the date must be spoted in this block does not reve date on the Department rovisions, if any. SIGNATURE: /S/ E Signature of a me This document is execut I am aware that any false	ecific and cannot be more than five business days prior to or 90 of meet the applicable statutory filing requirements, this date will not be of State's records. Emiliya Mirkina Ember or an authorized representative of a member. ted in accordance with section 605.0203 (1) (b), Florida Statutes.
CV: Effective ettive date is I f filing.) he date insert eent's effective CVI: Other pr	e date, if other than the date listed, the date must be spoted in this block does not reve date on the Department rovisions, if any. SIGNATURE: /S/ E Signature of a me This document is execut I am aware that any false	emiliya Mirkina ember or an authorized representative of a member. ted in accordance with section 605.0203 (1) (b), Florida Statutes. en information submitted in a document to the Department of State

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

ARTICLE IV-