

L24000060740

(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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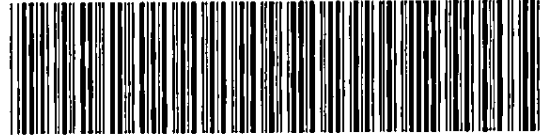
(Business Entity Name)

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**CAPITAL CONNECTION, INC.**

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301  
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

9151 SW 110 Terr LLC

Please Debit FCA000000003 For: 125

Thank you Seth Neeley



- \_\_\_ Art of Inc. File \_\_\_\_\_
- \_\_\_ LTD Partnership File \_\_\_\_\_
- \_\_\_ Foreign Corp. File \_\_\_\_\_
- \_\_\_ L.C. File \_\_\_\_\_
- \_\_\_ Fictitious Name File \_\_\_\_\_
- \_\_\_ Trade/Service Mark \_\_\_\_\_
- \_\_\_ Merger File \_\_\_\_\_
- \_\_\_ Art. of Amend. File \_\_\_\_\_
- \_\_\_ RA Resignation \_\_\_\_\_
- \_\_\_ Dissolution / Withdrawal \_\_\_\_\_
- \_\_\_ Annual Report / Reinstatement \_\_\_\_\_
- \_\_\_ Cert. Copy \_\_\_\_\_
- \_\_\_ Photo Copy \_\_\_\_\_
- \_\_\_ Certificate of Good Standing \_\_\_\_\_
- \_\_\_ Certificate of Status \_\_\_\_\_
- \_\_\_ Certificate of Fictitious Name \_\_\_\_\_
- \_\_\_ Corp Record Search \_\_\_\_\_
- \_\_\_ Officer Search \_\_\_\_\_
- \_\_\_ Fictitious Search \_\_\_\_\_
- \_\_\_ Fictitious Owner Search \_\_\_\_\_
- \_\_\_ Vehicle Search \_\_\_\_\_
- \_\_\_ Driving Record \_\_\_\_\_
- \_\_\_ UCC 1 or 3 File \_\_\_\_\_
- \_\_\_ UCC 11 Search \_\_\_\_\_
- \_\_\_ UCC 11 Retrieval \_\_\_\_\_
- \_\_\_ Courier \_\_\_\_\_

Signature



Requested by: SN

Name \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

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# ARTICLES OF ORGANIZATION FOR

## 9151 SW 110 Terr LLC

The undersigned, for the purpose of forming a company under the Florida Limited Liability Act, hereby adopts the following Articles of Organization.

### ARTICLE I: NAME

The name of the Limited Liability Company is: 9151 SW 110 Terr LLC

### ARTICLE II: PRINCIPAL OFFICE

The principal office of the Limited Liability Company is:

4531 Ponce de Leon Blvd, Suite 300, Coral Gables, FL 33146

The mailing address of the Limited Liability Company is:

4531 Ponce de Leon Blvd, Suite 300, Coral Gables, FL 33146

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### **ARTICLE III: INITIAL REGISTERED AGENT AND ADDRESS**

The name and address of the initial registered agent is **Anthony Napoliello, 4531 Ponce de Leon Blvd Suite 300, Coral Gables, FL 33146**

### **ARTICLE IV: AUTHORIZED MEMBER AND OR MANAGER**

The name and address of each initial person authorized to manage and control the Limited Liability Company is:

**Anthony Napoliello, Manager  
4531 Ponce de Leon Blvd Suite 300, Coral Gables, FL 33146**

The undersigned has executed these Articles of Organization for filing purposes this 2<sup>nd</sup> day of February 2024.

*/S/ Anthony Napoliello, as Authorized Representative for 9151 SW 110 Terr LLC*

\_\_\_\_\_  
**Authorized Representative**

CERTIFICATE OF DESIGNATION  
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of the Florida Statutes, the mentioned Limited Liability Company, organized under the laws of the state of Florida, submits the following statement in designating the registered office/registered agent, in the state of Florida.

1. The name of the Limited Liability Company is:

**9151 SW 110 Terr LLC**

2. The name and street address of the registered agent and office is:

**Anthony Napoliello, 4531 Ponce de Leon Blvd Suite 300, Coral Gables, FL 33146**

HAVE 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.

*/S/ Anthony Napoliello*

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**Registered Agent**