

125000424102

RE
9-17-25

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

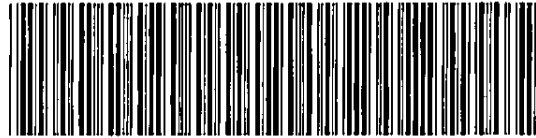
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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SEP 17 2025 9:08 AM

RECEIVED
2025 SEP 16 PM 3:25
OFFICE OF CORPORATION
AND COMMERCIAL
REGISTRATION

CAPITAL CONNECTION, INC.

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

15TH AVENUE REDEVELOPMENT, 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:

Name

Date

Time

Walk-In

Will Pick Up

**ARTICLES OF ORGANIZATION
OF
15TH AVENUE REDEVELOPEMENT, LLC**

**ARTICLE 1
NAME**

The name of the limited liability company is 15TH AVENUE REDEVELOPEMENT, LLC.

**ARTICLE 2
ADDRESS**

The mailing address and street address of the principal office of the limited liability company are:

Principal Office Address: 6401 Northwest 15th Avenue, Suite 122
Miami, Florida 33147

Mailing Address: 6401 Northwest 15th Avenue, Suite 122
Miami, Florida 33147

**ARTICLE III
REGISTERED AGENT**

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

Roxana I. Nasco, P.A.
2600 So. Douglas Road, Suite 913
Coral Gables, Florida 33134

**ARTICLE IV
MANAGEMENT**

The name and address of the person authorized to manage and control the limited liability company is:

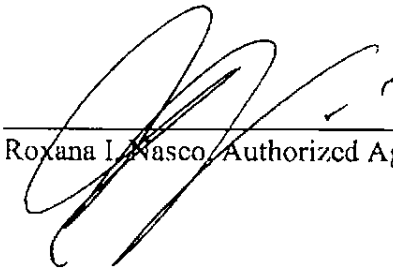
Title: Manager Name and address: CHAUNCEY LOCKETT
6330 Northwest 15th Avenue
Miami, Florida 33147

Title: Manager Name and address: GORDEN E. KNOWLES
300 Northeast 150th Street
Miami, Florida 33166

**ARTICLE V
EFFECTIVE DATE**

Effective date, if other than the date of filing is September 12, 2025.

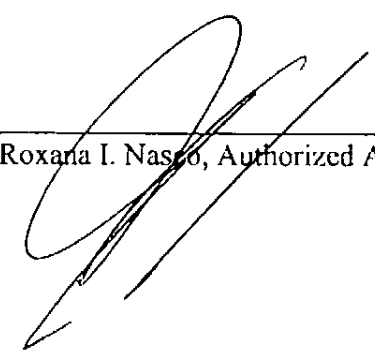
These Articles of Organization is executed in accordance with Section 605.0203(1)(b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third-degree felony as provided for in Section 817.155, Florida Statutes.



Roxana I. Nasco, Authorized Agent

ACCEPTANCE OF APPOINTMENT BY REGISTERED AGENT

Having been named as registered agent and to accept service of process for the above 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 property 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, Florida Statutes.



Roxana I. Nasco, Authorized Agent