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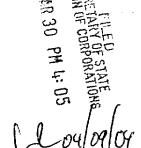
(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ity/State/Zip/Phone #)	
PICK-UP	☐ WAIT ☐ MAIL	
(Ві	usiness Entity Name)	
(Document Number)		
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TRANSMITTAL LETTER

	tion Section of Corporations
SUBJECT:	74 SPANISH STREET LLC
	(Name of Limited Liability Company)
The enclosed Arti	icles of Organization and fee(s) are submitted for filing.
	Please return all correspondence concerning this matter to the following:
_	GEORGE K ARNOLD
	(Name of Person)
	(Firm/Company)
	PO BOX 871
	(Address)
	DAYTONA BEACH, FLORIDA 32115
	(City/State and Zip Code)
For further inform	nation concerning this matter, please call:
GEORGE K	art
	(Name of Person) (Area Code & Daytime Telephone Number)

STREET ADDRESS:

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314 WISION OF CORPORATIONS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
74 SPANISH STREET LLC	
ARTICLE II - Address: The mailing address and street address of the principal of	office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
143 OCEAN SHORE BLVD	PO BOX 871
ORMOND BEACH, FLORIDA 32176	DAYTONA BEACH, FLORIDA 32115
ARTICLE III - Registered Agent, Registered Office, The name and the Florida street address of the registered	~ ~
	O4 MAR 30
GEORGE K ARNOLD	
Name	ROPET
143 OCEAN SHORE BO	
Florida street address (P.O. Box NO	T acceptable) Part of the state of the stat
ORMOND BEACH FLO	ORIDA 32176 G 57

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 608, Florida Statutes.

City, State, and Zip

gistered Agent's Signature

Page 1 of 2 (CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:			
"MGR" = Manager "MGRM" = Managing Member				
MGR M	GEORGE K ARNOLD 143 OCEAN SHORE BOULEVARD			
	ORMOND BEACH, FLORIDA 32	1/6		
				
(Use attachment if necessary)	-			
NOTE: An additional article must l	be added if an effective date is requested.	1,20	SIAM	
REQUIRED SIGNATURE:	K amel	MAR 30 PM	CRUTARY O	
(In accordance with section 60	28.408(3), Florida Statutes, the execution affirmation under the penalties of perjury true.)	H 4: 05	F STATE PORATIONS	
GEORGE K	C ARNOLD			

, , ,

Filing Fees: \$100.00 Filing Fee for Articles of Organization

- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee