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(Re	equestor's Name)	
(Ad	ldress)	<u> </u>
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(Cit	ty/State/Zip/Phone	: #)
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(Do	cument Number)	
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## Bryan Pardee 644 NW 2<sup>nd</sup> Ave Ft Lauderdale, FL, 33311 954-600-8058

Contents: Articles of organization, check, and cover letter.

#### TRANSMITTAL LETTER

TO: Registration Section Division of Corporations			
SUBJECT: 2485 NW 61st Street LLC			
(Name of Limited	l Liability Company)		
The enclosed Articles of Organization and fee(s) are su	abmitted for filing.		
Please return all correspondence concerning this matter	r to the following:		
Bryan Pardee			
4)	Name of Person)		
2485 NW 61st Street LLC			
	Firm/Company)		
644 NW 2nd Ave			
	(Address)	· · · · · · · · · · · · · · · · · · ·	
Ft Lauderdale, Florida 33311			
	State and Zip Code)		
For further information concerning this matter, please	call:		
	at (954) 600-8058 (Area Code & Daytime Te		
(Name of Person)	(Area Code & Daytime Te	elephone Number)	
Enclosed is a check for the following amount:		20	
☐ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S \$160.00 Filing Feed Certificate of Status & Certified Copy (additional copy is enclosed)	
STREET ADDRESS: Registration Section	MAILING A Registration S	ection N	1.7 1.7
Division of Corporations	Division of Co	orporations	<del>55</del>
409 E. Gaines Street Tallahassee, Florida 32399	P.O. Box 632 Tallahassee, F		
Tallanassee, riorida 32399	i ananassee, r	1011ua 343 (4	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE I - Name:** The name of the Limited Liability Company is: 2485 NW 61st Street LLC **ARTICLE II - Address:** The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 644 NW 2nd Ave 644 NW 2nd Ave Ft. Lauderdale, Florida 33311 Ft. Lauderdale, Florida 33311 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: Neil Morris Name 644 NW 2nd Ave Florida street address (P.O. Box NOT acceptable) Ft. Lauderdale, Florida 33311 City, State, and Zip

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, F.S.

(CONTINUED)

Page 1 of 2

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

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

Title: "MGR" = Manag "MGRM" = Man		Name and Address:	
MGR		Bryan Pardee	
	<del></del>	644 NW 2nd Ave	
		Ft. Lauderdale, Florida 33311	
MGRM		Neil Morris	
·		644 NW 2nd Ave	
		Ft. Lauderdale, Florida 33311	
	<del></del>		
	<del></del>		
(Use attachment i		added if an effective date is requested.	
REQUIRED SIC		added if an effective date is requested.	
	Signature of a member or	Movas an authorized representative of a member.	
	(In accordance with section of this document constitutes that the facts stated herein	608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury a are true.)	- 60N 70
	Neil	Morris	
	Typed	or printed name of signee	$\mathbb{Z}$
17:332 17:			

Filing Fees:

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

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