## 120000032343

(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
<b>V</b>	
PICK-UP WAIT MAIL	
(Business Entity Name)	_
(Document Number)	
(Boothelit Williber)	
Certified Copies Certificates of Status	_
Special Instructions to Filing Officer.	





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## COVER LETTER

	Sew Filing So Division of C				
SUBJECT	Sydney F	larbour, LLC			
OCOLC	··		Limited Liab	lity Company	
The enclos	sed Articl <b>e</b> s o	of Organization and fee(s	) are submitte	d for filing.	
Please reti	ırn all correst	ondence concerning this	s matter to the	following:	
	John Ainsw	orth, Esq.			
			Name o	l Person	
	Ainsworth	& Clancy PLLC			
			Firm/Co	empany	
	801 Brickel	l Ave., 9th Floor			
			Addi	ess	
	Miami, FL	33131			
	into@busine	ss-esa.com	City/State an	d Zip Code	
-		E-mail address: (to be us	ed for future a	nnual report notificat	tion)
For further in		ncerning this matter, ple			
-	John Ainswe		305	600-3816	
	Nam	e of Person		Daytime Telephor	ne Number
Enclosed is	a check for ti	he following amount:			
<b>≡\$125.00</b>		□\$130.00 Filing Fee Certificate of Status	Certifie	5.00 Filing Fee & ed Copy ed Copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New Fi Divisio P.O. Bo	g Address ling Section on of Corporations ox 6327 ussee, FL 32314	,	Street Address New Filing Section Di The Centre of Tallaha (415 N. Monroe Stree Tallahassee, FL 3230)	issee et, Suite 810

## FILED

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2020 FEB -3 AMII: 41

ARTICLE I - Name:

The name of the Limited Liability Company is:

SECRETARY OF STATE TALLAHASSEE, FL

				TALL
Sydney Harbour, LLC				
(Must conati	n the words "Limite	d Liability Compar	ıy, "L.L.C.," or "LLC.")	<del></del>
ARTICLE II - Address: The mailing address and street add	ress of the principal	office of the Limit	ted Liability Company is:	
Principal	Offic <u>e A</u> ddress:		Mailing Address	
1100 Brickell Bay Driv	re.#310747	1	100 Brickell Bay Drive, #31074	7
Miami, FL 33231			liami, FL 33231	
he name and the Florida street ad	dress of the registere	rd agent are;		
	Ainsworth & Clane	_		
		Name		
	801 Brickell Ave., 9			
	Florida street addre	ss (P.O. Box <u>XOT</u>	acceptable)	
-	Miami	FL	33131	
	City	State	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 605, F.S..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

ARTICLE I	١.
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The name and address of each person authorized to manage and control the Limited Liability Company:

Title: "AMBR" = Authorized Member	Name and Address:	
"MGR" = Manager <u>MGR</u>	Andre Dua 1100 Brickell Bay Drive, #310747 Miami, FL 33231	<del>-</del>
<u>MGR</u>	David Anthony Chia 1100 Brickell Bay Drive, #310747 Miami, FL 33231	-   1 SE(
		TALLAHASSE
		OF STAT
(Use attachment if necessary)		m
the date of filing.)  Note: If the date inserted in this block does the document's effective date on the Depart ARTICLE VI: Other provisions, if any.	be date of filing:	
REQUIRED SIGNATURE:	Airsnorth	
l am aware that any	a member or an authorized representative of a member, executed in accordance with section 605.0203 (1) (b). Florida Statutes, a false information submitted in a document to the Department of State degree felony as provided for in s.817,155, F.S.	
John Ainsw	orth - Legal Representative Typed or printed name of signee	

Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

S 5.00 Certificate of Status (Optional)