Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : RABIDEAU KLEIN
Account Number : I2020000035
Phone : (561)655-6221
Fax Number : (561)655-3221

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

EMAIL ADDRAUGUESS: GRABIDE AUGUARIDE AUGUEIN.

FLORIDA LIMITED LIABILITY CO.

321 Churchill, LLC

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$160.00

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Electronic Filing Menu

Corporate Filing Menu

Help

JH,

COVER LETTER

	New Filing Sec Division of Co				
	321 Church	hill, LLC			
SUBJEC	T;	Name of Lin	nited Liabilit	y Company	
The	كم مداللسنة الاست	O-conjuntor and fracts an		ian Elima	
		Organization and fee(s) are		-	
Please re	·	ondence concerning this ma	itter to me ic	nowing:	
	Guy Rabide	8u 			
			Name of I	erson	
	Rabideau K	lein		•	
		-	Firm/Con	ipany	
	440 Royal P	alm Way, Suite 101			
	 -		Addre		
	Palm Beach	, Florida 33480			
			ity/State and	Zip Code	
		abideauklein.com E-mail address: (to be used	for future ar	mual report notification	
Dog fireha		oncerning this matter, please			
roi minic					
	Garrett Ellis	at (51	655-6221	<u>-</u>
	Nan	ne of Person A	rea Code	Daytime Telephone	Number
Enclosed	lis a check for t	he following amount:			
	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certific	.00 Filing Fee & d Copy I copy is enclosed)	■\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisi P.O. E	ng Address Filing Section on of Corporations Box 6327 sassee, FL 32314		Street Address New Filing Section Di The Centre of Tallaha 415 N. Monroe Stree Callahassee, FL 3230	ssee et, Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

321 Churchill, LLC		_	
(Must con	atin the words "Limited Li	iability Company, '	L.L.C.," or "LLC.")
ARTICLE II - Address:			
The mailing address and street i	address of the principal off	fice of the Limited	Liability Company is:
<u>Princi</u>	al Office Address:		Mailing Address:
117 Wells Road		117	Wells Road
Palm Beach, FL 334	180	Palm	Beach, FL 33480
ARTICLE III - Registered Ag			
	y cannot serve as its own F active Florida registration	Registered Agent. \	
The Limited Liability Compan another business entity with an	y cannot serve as its own F active Florida registration	Registered Agent. \	
The Limited Liability Compan another business entity with an	y cannot serve as its own F active Florida registration address of the registered a	Registered Agent. \	
The Limited Liability Compan another business entity with an	y cannot serve as its own F active Florida registration address of the registered a	Registered Agent. Y agent are: Name	
The Limited Liability Compan another business entity with an	y cannot serve as its own F active Florida registration address of the registered a Guy Rabideau	Registered Agent. Y agent are: Name Suite 101	ou must designate an individual o
The Limited Liability Compan another business entity with an	y cannot serve as its own F active Florida registration address of the registered a Guy Rabideau 440 Royal Palm Way,	Registered Agent. Y agent are: Name Suite 101	ou must designate an individual o

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title: "AMBR" = A "MGR" = Ma	uthorized Member nager	dress:
MGR	Brittain Bardes Dam	gard
	117 Weils Road	
	Paim Beach, FL 334	80
 		
		
,	nt if necessary)	
LE V: Effective Mective date is lited filling.) If the date insert	date, if other than the date of filing:sted, the date must be specific and cannot be more	e than five business days prior to or 90 days a
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LE V: Effective flective date is lie of filing.) If the date insert ument's effectiv LE VI: Other pr	date, if other than the date of filing: sted, the date must be specific and cannot be more ed in this block does not meet the applicable statuto e date on the Department of State's records. evisions, if any. Signature of a member or an authorized r This document is executed in accordance with see I am aware that any false information submitted in	representative of a member. tion 605.0203 (1) (b), Florida Statutes. a document to the Department of State s.817.155, F.S.

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