# L20000 371726

(Requestor's Name)		
	,	
	/A.J.J	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
/		
M PICK-UF	P WAIT [	MAIL
\		_
	(Business Entity Name)	
(Document Number)		
Certified Copies	Certificates of Sta	tus
	<del></del>	
Special Instructions	to Filing Officer:	
	<del></del>	

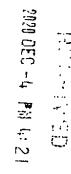
Office Use Only

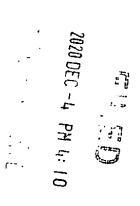


100356052931

12/07/20--01001--008 \*\*4480.00

0 HICO DEC V ± 2020





# COVER LETTER

	w Filing Section vision of Corporations
SUBJECT:	601 SBV LLC
SUBJECT:	Name of Limited Liability Company
The enclose	d Articles of Organization and fee(s) are submitted for filing.
Please return	n all correspondence concerning this matter to the following:
	Michelle E Winiecki
-	Name of Person
	Fusion Management Realty Group
-	Firm/Company
	1510 Stickney Point Road #406
	Address
	Sarasota FL 34231
	City/State and Zip Code
in	nichelle@gcpmgt.com
_	E-mail address: (to be used for future annual report notification)
For further in	formation concerning this matter, please call:
;	Michelle E Winiecki 941 809.3404
_	Name of Person Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:
\$125.00 Fil	S130.00 Filing Fee & S155.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed)  S160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

# **Mailing Address**

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

# Street Address

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
601 SBV LLC	
(Must contain the words "Limited Liab	ility Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address of the principal office	of the Limited Liability Company is:
Data sixed Office Addresses	Mailing Addum.
Principal Office Address:	Mailing Address:
1510 Stickney Point Road #406	1510 Stickney Point Road #406
Sarasota FL 34231	Sarasota FL 34231
ARTICLE III - Registered Agent, Registered Office, & R	tegistered Agent's Signature:
The Limited Liability Company cunnot serve as its own Reg	
another business entity with an active Florida registration.)	
The name and the Florida street address of the registered age	ent are:
Michelle E Winiecki	

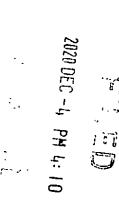
1510 Stickney Point Road #406 Florida street address (P.O. Box NOT acceptable) Sarasota FLCity Zip State

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.

Name

Registered Agent's Signature (REQUIRED)

(CONTINUED)



### ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company;

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AR	Michelle E Winiecki
	1510 Stickney Point Road #406
	Sarasota FL 34231
	0 100
AMBR	Sarasota Boatyard Village LLC
	1510 Stickney Point Road #406
	Sarasota FL 34231
	<del></del>
<del></del>	
(Use attachment if necessary)	
RTICLE V: Effective date, if other than the date of filing:	(OPTIONAL)
If an effective date is listed, the date must be specific and	cannot be more than five business days prior to or 90 days after
ne date of filing.)	
Note: If the date inserted in this block does not meet the a	pplicable statutory filing requirements, this date will not be listed as
he document's effective date on the Department of State's	s records.
RTICLE VI: Other provisions, if any.	
<del></del>	
REQUIRED SIGNATURE:	
Photelle	e //leauxi

Signature of a member or an authorized representative of a member.

This document 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 s.817.155, F.S.

Michelle E Winiecki

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)
- \$ 5.00 Certificate of Status (Optional)