12000 334

(Requestor's Name)
(Address)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
THE TOTAL TO
(Business Entity Name)
(Document Number)
,
0.45.10.40.4
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400372756884

02/01/22--01006--011 **155.00

RECEIVED

CORPORATE ' ACCESS, ____

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

WALKIN			
	PICK U	P: <u>2/1 DANNY</u>	
xx	CERTIFIED COPY		
	РНОТОСОРУ		
	CUS		
XX	FILING	LLC	
[.	208 SE 9 STREET LLC		
	(CORPORATE NAME AND DOCUMEN	T #)	
).	(CORPORATE NAME AND DOCUMEN	TT #)	
.	(CORPORATE NAME AND DOCUMENT	T #)	
•	(CORPORATE NAME AND DOCUMEN	T #)	
•	(600)		
	(CORPORATE NAME AND DOCUMEN	I #)	
-	(CORPORATE NAME AND DOCUMEN	T #)	
PECIAI NSTRU	L CTIONS:		

SECRETARY OF STATE

2022 FEB - 1 AM 11: 50

Articles of Organization For Florida Limited Liability Company

Article I

The name of the Limited Liability Company is: 208 SE 9 STREET LLC

Article II

The street address of the principal office of the Limited Liability Company is:

900 BRICKELL KEY BLVD.

UNIT 3203

MIAMI FL 33131

The mailing address of the Limited Liability Company is:

900 BRICKELL KEY BLVD.

UNIT 320

MIAMI FL 33131

Article III

The name and Florida street address of the registered agent is:

GERALD W GRITTER PA 701 S SEAS DR UNIT 101 JUPITER FL 33477

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.

Registered Agent Signature: GERALD W. GRITTER

Article IV

The name and address of the person authorized to manage the LLC:

Title: MGR

BRIAN S. CAMPBELL

900 BRICKELL KEY BLVD.

UNIT 3203 MIAMI FL 33131

Signature of member or an authorized representative

Electronic Signature: GERALD W. GRITTER

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.

SECRETARY OF STATE