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(Requestor'	s Name)	
(Address)		
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	Zip/Phone #)	
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(Business B	Entity Name)	
(Document	Number)	
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Special Instructions to Filing Officer		

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FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 11/21/2023

NAME: 212 NE 46TH PROPERTY LLC

TYPE OF FILING: ARTICLES

COST:

160.00

RETURN: CERTIFIED COPY AND GOOD STANDING PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

COVER LETTER

	New Filing Sec Division of Co				
SUBJEC		TH PROPERTY LLO	3		
SOBJEC		Name	of Limited Li	iability Company	
The enclo	osed Articles of	Organization and fee	(s) are subm	itted for filing.	
Please re	urn all correspo	ondence concerning th	nis matter to	the following:	
	Mikael Cohe	en			
			Nam	ne of Person	
			Firn	n/Company	
	\$701 Wilshi	re Blvd.			
		<u> </u>		Address	
	Beverly Hill	s, CA 90211			
	mikaelc@ildi	ocine com	City/Star	te and Zip Code	
			used for fut	ure annual report notifica	tion)
For further		ncerning this matter,		·	
	Mikael Cohe	n	310 at (205-5555	
	Nam	e of Person	Area Coo	de Daytime Telepho	ne Number
Enclosed	is a check for t	he following amount:			
		-	Fee & □ us Ce	\$155.00 Filing Fee & entified Copy (tional copy is enclosed)	■\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Division P.O. B	g Address iling Section on of Corporations ox 6327 assee, FL 32314		Street Address New Filing Section I The Centre of Tallal 2415 N. Monroe Str Tallahassee, FL 323	nassee cet, Suite 810

AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:					
212 NE 46TH PROPERTY LLC					
(Must contain the words "Limited	l Liability Con	ipany, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the principal	office of the L	imited Liability Company is:			
Principal Office Address:		Mailing Address:			
1901 Ponce De Leon Blvd. Coral Gables, FL 33134		8701 Wilshire Blvd. Beverly Hills, CA 90211			
ARTICLE III - Registered Agent, Registered Office (The Limited Liability Company cannot serve as its ow another business entity with an active Florida registration of the registered and the Florida street address of the registered and the Florida street address of the Florida street and the Florid	n Registered Aion.)		ual or		
· ·	C	44515			
PARACORP	INCORPORA Name	160			
155 Office Plaza	Drive - 1st Flo	Or			
	Florida street address (P.O. Box NOT acceptable)				
TALLAHASSE					
City	State	Zip			
Having been named as registered agent and to accept ser place designated in this certificate. I hereby accept the ap further agree to comply with the provisions of all statutes um familiar with and accept the obligations of my position	pointment as re relating to the	egistered agent and agree to act in thi proper and complete performance of	s capacity, T my duties, and i		
Please se	ee attached.				
Regis	stered Agent's	Signature (REQUIRED)			
	(CONTIN	UED)			

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	NBR Investment Holdings LLC
	1901 Ponce De Leon Blvd.
	Coral Gables, FL 33134
MGR	Jean Simonian
	1901 Ponce De Leon Blvd.
	Coral Gables, FL 33134
MGR	Mikael Cohen
	1901 Ponce De Leon Blvd.
	Coral Gables, FL 33134
RTICLE V: Effective date, if other than the fan effective date is listed, the date must ne date of filing.)	be specific and cannot be more than five business days prior to or 90 days after
Note: If the date inserted in this block doe he document's effective date on the Depar	s not meet the applicable statutory filing requirements, this date will not be listed as tment of State's records
RTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
	- July cong
This document is I am aware that an	of a member or an authorized representative of a member, executed in accordance with section 605,0203 (1) (b). Florida Statutes, by false information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S.
Mih	Kael Cohen 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)

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

DATE: 11/20/2023

ENTITY NAME: 212 NE 46TH PROPERTY LLC

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Leticia Herrera, Assistant Secretary

Paracorp Incorporated