11/29/23, 9:41 AM

Division of Corporations

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FLORIDA LIMITED LIABILITY CO. **NETEX FLA23 LLC**

Certificate of Status	0
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11

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

NETEX FLA23 LLC

(Must contain the words "Limited Liability 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:

Principal Office Address:

Mailing Address:

1000 BRICKELL PLAZA #4906

MIAMI, FL 33131

544 GRAY RD MARSHALL, TX 75672

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

EDWIN B. BANKS

Name

1000 BRICKELL PLAZA #4906

Florida street address (P.O. Box NOT acceptable)

State

City

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.,

|s| Cdwin B. Banks
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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	EDWIN B. BANKS 544 GRAY RD MARSHALL, TX 75672		- - -
			- -
			- -
			• - •
(Use attachment if necessary)			
ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be so the date of filing.) Note: If the date inserted in this block does not the document's effective date on the Department	pecific and cannot be more than five meet the applicable statutory filing to	e business days prior to or 90	
ARTICLE VI: Other provisions, if any.			
REQUIRED SIGNATURE: /a/	Cdwin B. Banks	-4iii 	2023 HOV 29
This document is exect I am aware that any fal:	nember or an authorized representated in accordance with section 605.0 se information submitted in a docume ee folony as provided for in \$.817.155	0203 (1) (b), Florida Statutes. ent to the Department of State	<u>. </u>

Filing Fees:

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

EDWIN B. BANKS

Typed or printed name of signee

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