Page ≠ of A • No

orida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H240001143813)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : RASI

Account Number : I20220000023 Phone : (800)221-2972 Fax Number : (917)243-5843

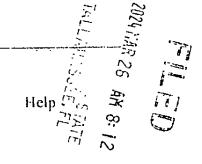
Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Ema	i	1	۸л	dг	20	c	٠	

FLORIDA LIMITED LIABILITY CO. 238 S E Park LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

Electronic Filing Menu Corporate Filing Menu



From: Mary Brocks

ARTICLES OF OR CANIZATION FOR ELORIDA LUMITED LURRILITY COMPANY

238 S E Park LLC (Must contain the words "Limited Lie	ability Company, "L.L.C.," or "LLC.")
FICLE II - Address: mailing address and street address of the principal offi	ice of the Limited Liability Company is:
Principal Office Address:	Malling Address:
13 NE 2nd Avenue Suite 104 Dania Beach, FL 33004	13 NE 2nd Avenue, Suite 104 Danis Beach, FL 33004
TICLE III - Registered Agent, Registered Office, &	Registered Agent's Signature:
TICLE III - Registered Agent, Registered Office, &	: Registered Agent's Signature: Legistered Agent, You must designate an individual o

Name

13 NE 2nd Avenue, Suie 104

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

Dania Beach FL 33004

City State Zip

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place dasignated 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)



Titic; "AMBR" = Au "MGR" = Man	Namo and Address: Ager
AMBR	Elbja Allagracia Sanchez Moscoso
	13 NE 200 Avenue Nuite 104
	Dania Beach, Fl 33004
	
	
EV: Effective ective date is in	date, if other than the date of filing:
EV: Effective ective date is list if filling.) The date insertement's effective	date, if other than the date of filing: (OPTIONAL) ted, the date must be specific and cannot be more than five business days prior to or 90 of d in this block does not meet the applicable statutory filing requirements, this date will not date on the Department of State's records.
ctive date is in of filling.) the date inserte	date, if other than the date of filing: (OPTIONAL) ted, the date must be specific and cannot be more than five business days prior to or 90 of d in this block does not meet the applicable statutory filing requirements, this date will not date on the Department of State's records.
E Y: Effective ective date is its of filing.) the date inserte ment's effective E VI: Other pro	date, if other than the date of filing: (OPTIONAL) ted, the date must be specific and cannot be more than five business days prior to or 90 of d in this block does not meet the applicable statutory filing requirements, this date will not date on the Department of State's records.
E V: Effective ective date is it of filing.) the date inserte ment's effective E VI: Other pro	date, if other than the date of filing:
E Y: Effective ective date is its of filing.) the date inserte ment's effective E VI: Other pro	date, if other than the date of filing:
E Y: Effective ective date is its of filing.) the date inserte ment's effective E VI: Other pro	date, if other than the date of filing:
E Y: Effective ective date is its of filing.) the date inserte ment's effective E VI: Other pro	date, if other than the date of filing:
E Y: Effective ective date is its of filing.) the date inserte ment's effective E VI: Other pro	date, if other than the date of filing:
E Y: Effective ective date is its of filing.) the date inserte ment's effective E VI: Other pro	date, if other than the date of filing:
E Y: Effective ective date is its of filing.) the date inserte ment's effective E VI: Other pro	date, if other than the date of filing:

2024 HAR 26 AM 8: 13