

FWCI GA

Requester's Name

Po Box 15159

Address

Tallahassee FL 32317

City/State/Zip

Phone #

386-9200

LD10000116336

Office Use Only

CORPORATION NAME(S) & DOCUMENT NUMBER(S), (if known):

1. Newport Star LLC (Corporation Name) (Document #)

2. (Corporation Name) (Document #)

3. (Corporation Name) (Document #)

4. (Corporation Name) (Document #)

☒ Walk in

☐ Pick up time

☒ Certified Copy

☒ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

NEW FILINGS

- ☐ Profit
- ☐ Not for Profit
- ☒ Limited Liability
- ☐ Domestication
- ☐ Other

OTHER FILINGS

- ☐ Annual Report
- ☐ Fictitious Name

AMENDMENTS

- ☐ Amendment
- ☐ Resignation of R.A., Officer/Director
- ☐ Change of Registered Agent
- ☐ Dissolution/Withdrawal
- ☐ Merger

REGISTRATION/QUALIFICATION

- ☐ Foreign
- ☐ Limited Partnership
- ☐ Reinstatement
- ☐ Trademark
- ☐ Other

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01 SEP 24 PM 2:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

RECEIVED
DIVISION OF CORPORATION

Examiner's Initials

**ARTICLES OF ORGANIZATION OF
NEWPORT STAR, LLC**

Article I – Name:

The name of the Limited Liability Company is Newport Star, LLC.

Article II – Address:

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

2101 NW Corporate Boulevard, Suite 415
Boca Raton, FL 33431

Article III – Registered Agent, Registered Office And Registered Agent's Signature:

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

Michael Camilleri
2101 NW Corporate Boulevard, Suite 415
Boca Raton, FL 33431


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 608, F.S..



Registered Agent's Signature

Article IV – Management:

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager-managed company.



Signature of a member or an authorized representative of a member

In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

MICHAEL CAMILLERI

Typed or printed name of signer

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BOKALIA STATE
FILED

APPROVED
AND
FILED