

Division of Corporations

Page 1 of 2

L0100000022219

Florida Department of State

Division of Corporations

Public Access System

Katherine Harris, Secretary of State

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.

(((H01000123050 6)))

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) 205-0383

From:

Account Name : KILLGORE, PEARLMAN, STAMP, ORNSTEIN & SQUIRES
Account Number : I19980000007
Phone : (407) 425-1020
Fax Number : (407) 839-3635

LIMITED LIABILITY COMPANY

Furniture Porte, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

01 DEC 20 PM 2:03
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

01 DEC 20 PM 1:57
RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

L01-22219
OK

Electronic Filing Menu

Corporate Filing

Public Access Help

Fax Audit No: H01000123050 6**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is Furniture Fortz, LLC.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is c/o Jack Oppenheimer, 111 North Orange Avenue, Suite 1100, Orlando, Florida 32801.

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

The name and Florida street address of registered agent are:

Neal E. Nowend
8154 Via Di Veneto
Boca Raton, Florida 33496

Having been named as registered agent and to accept service of process for the above state 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.


Neal E. Nowend, Registered Agent**ARTICLE IV - Management (Check box if applicable.)**

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

(An additional article must be added if an effective date is requested)


Neal E. Nowend, Manager

(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.)


Neal E. Nowend, Manager

FILED

01 DEC 20 PM 2:03

SECRETARY OF STATE
TALLAHASSEE, FLORIDAFax Audit No: H01000123050 6