

L030000014721

Florida Department of State
Division of Corporations
Public Access System

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.

((H03000140189 9)))

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 : FAS-T CORP. AGENTS, INC.
Account Number : 071001002335
Phone : (305) 599-0839
Fax Number : (305) 716-0346

LIMITED LIABILITY COMPANY

CIPHA, LLC

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

RECEIVED
03 APR 24 PM 1:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DIVISION OF CORPORATION

4-24-03

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:
CIPHA, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:
1078 Pelican Drive, Palm Beach, FL 33414

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

Andrew Mossop
Name

10786 Pelican Drive
Florida street address (P.O. Box NOT acceptable).

Palm Beach, FL 33414
City, State, and Zip

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03 APR 24 PM 1:32

FILED

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)



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)

ANDREW MOSSOP

Typed or printed name of signer

12 AND
FILED
03 APR 24 PM 1:32
SECRETARY OF STATE
TALLAHASSEE, FLORIDA