

L14000116002  
Florida 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.

((H14000175441 3)))



H140001754413ABC.

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) 617-6383

From: Account Name : CORP USA  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (786) 409-5946

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

Email Address: \_\_\_\_\_

FLORIDA LIMITED LIABILITY CO.  
CAPCAKE REAL ESTATE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

RECEIVED  
14 JUL 23 AM 6:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

14 JUL 23 AM 8:21

Electronic Filing Menu

Corporate Filing Menu

Help

414000 175441

**ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I**

The name of the Limited Liability Company is: **CAPCAKE REAL ESTATE, LLC**

**ARTICLE II**

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

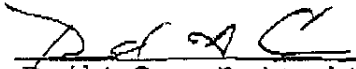
10474 Santa Monica Blvd.  
Suite 402  
Los Angeles, CA 90025

**ARTICLE III**

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

**David A. Coven, Esq.**  
2856 E. Oakland Park Blvd.,  
Ft. Lauderdale, Florida 33306

*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 / am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605 F.S.*

  
David A. Coven, Registered Agent

**Article IV**

Management (Check box is 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)

Title:  
Manager or Managing Member

Name and Address:

Managing Member

Tair Wekselman  
10474 Santa Monica Blvd.  
Suite 402  
Los Angeles, CA 90025

14 JUL 23 AM 8:21

Member:

Steve Erdman  
Tair Wekselman  
10474 Santa Monica Blvd.  
Suite 402  
Los Angeles, CA 90025

Article V

*Effective date, if other than the date of filing: \_\_\_\_\_ (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)*

  
\_\_\_\_\_  
TAIR WEKSELMAN

(In accordance with section ~~605.03~~ Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

  
\_\_\_\_\_  
TAIR WEKSELMAN

14 JUL 23 AM 8:21