

L14 000155776

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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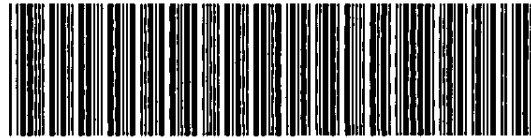
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: REGISTRATION SECTION DIVISION OF CORPORATIONS

SUBJECT:

**3025 PARK STREET HOLDINGS, LLC**

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

**STEPHEN HUNTER JOHNSON, ESQ.  
LYDECKER DIAZ  
1221 BRICKELL AVE, 19<sup>TH</sup> FLOOR  
MIAMI, FL 33131  
shj@lydeckerdiaz.com**

For further information concerning this matter, please call:

**STEPHEN HUNTER JOHNSON, ESQ.  
at  
(305) 415-6354**

Enclosed is a check for the following amount:

- |   |   |   |   |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|---|---|---|

**Mailing Address**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street/Courier Address**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

# ARTICLES OF ORGANIZATION FOR LIMITED LIABILITY COMPANY

## ARTICLE I – NAME

The name of the Limited Liability Company shall be:

**3025 PARK STREET HOLDINGS, LLC**

## ARTICLE II – PRINCIPAL PLACE OF BUSINESS AND MAILING ADDRESS

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

**835 MULLRANY DR.  
COPPELL, TX 75019**

## ARTICLE III –REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE

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

**STEPHEN HUNTER JOHNSON, ESQ.  
LYDECKER DIAZ  
1221 BRICKELL AVE, 19<sup>TH</sup> FLOOR  
MIAMI, FL 33131**

*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 605, F.S..*

  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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**ARTICLE IV – MANAGEMENT AND AUTHORIZED MEMBERS**

The name and address of each person authorized to manage and control the Limited Liability Company:

Title: (\*AMBR\* = Authorized Member / \*MGR\* = Manager)

Name and Address:

**MANAGER & AUTHORIZED MEMBER**

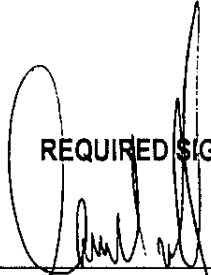
**BLACKACRE, LLC  
835 MULLRANY DR.  
COPPELL, TX 75019**

**ARTICLE V – EFFECTIVE DATE**

The Effective Date of these Articles of Organization shall be:

**SEPTEMBER 24 2014**

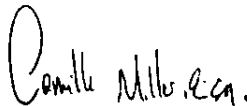
**REQUIRED SIGNATURE:**



**Signature of a member or an authorized representative of a member.**

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)



**Typed or printed name of signee**

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14 SEP 30 AM 7:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**