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(Requestor's Name)
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(Address)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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03/02/17--01020--012 **130.00

ECRETARY OF STATE LLAHASSEE, FLORIDA

n 03/06/17

COVER LETTER

TO:

New Filing Section

Div	vision of Corporations		
SUBJECT:	Organize Palm Beach, LLC		
	Name of Li	imited Liability	y Company
The enclose	d Articles of Organization and fee(s) a	ire submitted fo	or filing.
Please return	n all correspondence concerning this n	natter to the fol	llowing:
	Ibtisam Bogen		
•		Name of P	erson
	Organize Palm Beach, LLC		
-		Firm/Com	ppany
	17657 Foxborough Lane		
•		Addres	SS
	Boca Raton, Florida 33496		
		City/State and	Zip Code
	ambogen1234@gmail.com E-mail address: (to be use	ed for future an	nual report notification)
For further in	formation concerning this matter, plea		, open nomenton,
1	Ibtisam Bogen 9	917	330-3521
_	Name of Person	Area Code	Daytime Telephone Number
	a check for the following amount:		
\$125.00 Fil	Signature of Status Signature of Status	Certified	here the copy is enclosed) Stiling Fee & S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	N E C 2	Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Fallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Owening Delm Deep	* 110			
Organize Palm Beac (Must con	tain the words "Limited I	Liability Company, "	L.L.C.," or "LLC.")	
·			,	
ARTICLE II - Address: The mailing address and street a	addrace of the principal o	ffice of the Limited L	ichility Compony is:	
The maning address and street a	ductess of the principal o	ince of the Limited L	naomity Company is.	
<u>Princi</u>	oal Office Address:		Mailing Address:	
17657 Foxborough l	Lane	17657	Foxborough Lane	
Boca Raton, Florida 33496			Boca Raton, Florida 33496	
ARTICLE III - Registered Ag The Limited Liability Company	gent, Registered Office, y cannot serve as its own	& Registered Agent Registered Agent. Yo		
ARTICLE III - Registered Ag (The Limited Liability Companant another business entity with an	gent, Registered Office, y cannot serve as its own active Florida registratio	& Registered Agent Registered Agent. Yon.)	's Signature:	
ARTICLE III - Registered Ag (The Limited Liability Compananother business entity with an	gent, Registered Office, y cannot serve as its own active Florida registratio	& Registered Agent Registered Agent. Yon.)	's Signature:	
ARTICLE III - Registered Ag	gent, Registered Office, y cannot serve as its own active Florida registration address of the registered	& Registered Agent Registered Agent. Yon.)	's Signature:	
ARTICLE III - Registered Ag (The Limited Liability Compananother business entity with an	gent, Registered Office, y cannot serve as its own active Florida registration address of the registered	& Registered Agent Registered Agent. Youn.) diagent are:	's Signature:	
ARTICLE III - Registered Ag (The Limited Liability Compananother business entity with an	gent, Registered Office, y cannot serve as its own active Florida registration address of the registered Ibtisam Bogen 17657 Foxborough L	& Registered Agent Registered Agent. Youn.) diagent are:	's Signature: ou must designate an individual or	
ARTICLE III - Registered Ag (The Limited Liability Compananother business entity with an	gent, Registered Office, y cannot serve as its own active Florida registration address of the registered Ibtisam Bogen 17657 Foxborough L	& Registered Agent Registered Agent. Youn.) d agent are: Name	's Signature: ou must designate an individual or	

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 Signatur (REQUIRED)

(CONTINUED)

MAR -2 AMII

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager AMBR Ibtisam Bogen 17657 Foxborough Lane Boca Raton, Florida 33496 AMBR Caroline Toms 2350 Cherry Palm Road Boca Raton, Florida 33432 (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: February 15, 2017 ... (OPTIONAL) (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.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. **ARTICLE VI:** Other provisions, if any.

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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Ibtisam Bogen

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

REQUIRED SIGNATURE:

\$ 5.00 Certificate of Status (Optional)

17 MAR -2 AHII: 15
SEURLIARY OF STATE
TALLAHASSEF, FIRE