

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L18000191453

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H180002303193ABC.

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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : KOEPPPEL LAW GROUP, P.A.
Account Number : I20070000864
Phone : (561)659-6455
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.

~~ALPINE HOLDINGS, LLC~~ *Alpine Holdings 2205, LLC*

Certificate of Status	0
Certified Copy	0
Page Count	1064
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Electronic Filing Menu

Corporate Filing Menu

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AUG 09 2018

K. Brumbley



Aug. 9, 2018 2:34PM

No. 0624 P. 2



August 9, 2018

FLORIDA DEPARTMENT OF STATE
Division of Corporations

KOEPPPEL LAW GROUP, P.A.

SUBJECT: ALPINE HOLDINGS, LLC
REF: W18000072222

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The document number of the name conflict is P12000013977.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Taylor B Collins
Regulatory Specialist II
New Filing Section

FAX Aud. #: H18000230319
Letter Number: 918A00016418

((H18000230319 3)))

2016 AUG -9 AM 10:54
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ALPINE HOLDINGS 2205, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

1515 N. FLAGLER DR. #220
WEST PALM BEACH, FL 33401

1515 N. FLAGLER DR. #220
WEST PALM BEACH, FL 33401

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

JOEL P. KOEPPPEL, ESQ.

Name

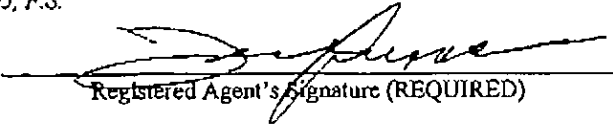
1515 N. FLAGLER DR. #220

Florida street address (P.O. Box NOT acceptable)

WEST PALM BEACH, FL 33401

City State 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 605, F.S.


Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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:

MGR

MEHDI AFSHAR

54 WEST 47th STREET, SUITE 3FE

NEW YORK, NY 10036

(Use attachment if necessary)

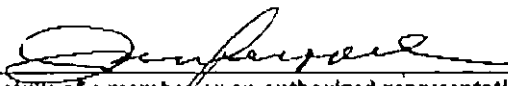
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.

REQUIRED SIGNATURE:


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.

JOEL P. KOEPPPEL

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)

\$ 5.00 Certificate of Status (Optional)

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