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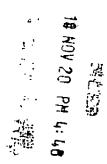
(Requestor's Name)
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COVER LETTER

	ew Filing Section ivision of Corporations				
SUBJECT	1100 NE 2nd Ave, LLC				
SUBJECT	Name of Limited Liability Company				
The enclos	ed Articles of Organization and fe	e(s) are submitted	for filing.		
Please retu	rn all correspondence concerning t	his matter to the f	following:		
	Karen J. Rocush				
		Name of	Person		
	Karen J. Rocush Living Trust, da	ted October 18, 2	018		
		Firm/Co	mpany		
	7793 Lee Road				
	Address				
	Waterman, II. 60556				
ı	kjmalak@hotmail.com	City/State an	d Zip Code		
-	<u> </u>	e used for future a	unnual report notificati		
For further in	nformation concerning this matter,			,	
	Danielle Kuhn	708 at (837-9111		
	Name of Person		Daytime Telephone		
Englaard is	a about far the fallowing amount				
\$125.00 Fi	ing Fee \$130.00 Filing Fe Certificate of State	e & \$155.0 us Certifi	00 Filing Fee & ed Copy al copy is enclosed)	\$160.00 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		Street Address New Filing Section Division of Corporation Clifton Building 2661 Executive Center		

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ty Company is:			
.L.C			<u> </u>
tain the words "Limited I	iability Company	, "L.L.C.," or "LLC.")	
address of the principal of	Tice of the Limited	I Liability Company is:	
nal Office Address:		Mailing Address:	
1100 NE 2nd Ave Fort Lauderdale, FL 33304			
active Florida registration address of the registered	n.) agent are:	You must designate an individ	niai oi
Orange Island Proper	Name		
1881 NF 26th St., Ste	: 212F		
Florida street address (P.O. Box NOT acceptable)			
Wilton Manors	FL	33305	
City	State	Zip	
e. I hereby accept the apporavisions of all statutes rebligations of my position	ointment as register clating to the prope as registered agen	red agent and agree to act in the r and complete performance of as provided for in Chapter 605	us capacity, 1 fmy duties, and l
	address of the principal of the principa	address of the principal office of the Limited and Office Address: 779 33304 Was gent, Registered Office, & Registered Agent, active Florida registration.) address of the registered agent are: Orange Island Property Management Name 1881 NE 26th St., Ste 212F Florida street address (P.O. Box NOT) Wilton Manors City State I agent and to accept service of process for the property of the appointment as registered agents of the property	tain the words "Limited Liability Company, "L.L.C.," or "LL.C.,") address of the principal office of the Limited Liability Company is: Mailing Address: Mailing Address: 7793 Lee Road Waterman, IL 60556 Jent, Registered Office, & Registered Agent's Signature: y cannot serve as its own Registered Agent. You must designate an individuative Florida registration.) address of the registered agent are: Orange Island Property Management Name 1881 NE 26th St., Ste 212F Florida street address (P.O. Box NOT acceptable) Wilton Manors FL 33305

18 NOV 20 PH 4: 48

A	DT	'ICI	L.	IV.

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

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager AMBR	Karen J Rocush Living Trust, dated October 18, 2018 7793 Lee Road Waterman, IL 60556
(Use attachment if necessary)	
f an effective date is listed, the date must be spe date of filing.)	e of filing:
RTICLE VI: Other provisions, if any.	
This document is execu	ember or an authorized representative of a member. ated in accordance with section 605.0203 (1) (b). Florida Statutes.
I am aware that any fals	the information submitted in a document to the Department of State are felony as provided for in s.817.155, F.S.
<u>Danielle B. Kuh</u>	Typed or printed name of signee
\$125.00 Filing Fee for Articles of O	Filing Fees:

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)