1/9/2019

To: 18506176381 From: 12143052508 Date: 01/09/19 Time: 11:33 AM Page: 01/03

# Division of Corporations

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.

(((H190000100903)))



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)617-6381

From:

Account Name : LEGALINC CORPORATE SERVICES INC.

Account Number : 120180000011 Phone : (844)386-0178 Fax Number : (214)317-4754

\*\*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. 525 3RD ST PSJ LLC

Certificate of Status	U
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu Corporate Filing Menu

Help

1/1



(((H19000010090 3)))

saCP pokora lic

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I Name

The name of the Limited Liability Company is:

Principal Office Address:

525 3RD ST PSJ LLC

### ARTICLE II Address

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

Mailing Address:

524 1st Street	524 1 <sup>st</sup> Street
Port St. Joe, FL 32456	Port St. Joe, FL 32456
	र्गाः ⊸् ि

## ARTICLE III Registered Agent, Registered Office & Registered Agent's Signature

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

Ira R. Shapiro 16375 NE 18<sup>th</sup> Avenue, Suite 225 North Miami Beach, FL 33162

Having been named as Registered Agent and to accept service of process for the above stated Limited Liubility 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.

Ira R. Shapiro, Registered Agent



(((H19000010090 3)))

#### ARTICLE IV Patity Purpose

The Limited Liability Company's purpose is to invest in qualified opportunity zoned property. Substantially all of its owned or leased tangible property is qualified opportunity zoned business property, and substantially all of its intangible property is used in the active conduct of qualified opportunity zoned business.

#### ARTICLE V

The Limited Liability Company is to be managed by one or more managers, and is therefore a manager - managed company.

#### ARTICLE VI Persons Authorized to Manage and Control

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

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	SE CAPALI	19 JAN -	:
MGR	Robert W. Pokora 524 1 <sup>st</sup> Street Port St. Joe, FL 32456	SET TO	9 AFI &	
MGR	Christos Karagianuls 524 1 <sup>st</sup> Street Part St. Joe, FL 32456	577	<b>639</b>	

Robert W. Pokora, MGR

(In accordance with Section 605.0203(1)(b), Florida Stantes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are area I am aware that any fake information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)