Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

eleventi

Account Name : HUNT & GROSS, P.A.

Account Number : 120010000038

Phone : (561:99/-9223 Fax Number : (561:99/-9288

**Finter the email address for this business entity to be used for fiture annual report mailings. Enter only one email address please. **

FLORIDA LIMITED LIABILITY CO. 616 SE 4TH AVENUE, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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Help

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	COVERDETTER		
	New Filing Section Division of Corporations		
SUBJEC	616 SE 4TH AVENUE, LLC		
.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	Name of Limited Liability Company		
The enclo	osed Articles of Organization and fee(s) are submitted for filing.		
Please rei	turn all correspondence concerning this matter to the following:		
	BETSY COURANT		
	Name of Person	-	
	GROSS HOFFMAN PLLC		
	Firm/Company	-	
	14 SE 4TH STREET, SUITE 36	19 F	SIAIP
	Address	EB	ACE CECE
	BOCA RATON, FL 33432	26	왕
•	City/State and Zip Code betsy@gh-legal.com	AM 11: 34	SECRETARY OF STA DIVISION OF CORPORATE
	E-mail address: (to be used for future annual report notification)		- R1. - 1 12.
For further	r information concerning this matter, please call:	4	OK:
	Betsy Courant 561 997-9223		
	Name of Person Area Code Daytime Telephone Number		
Enclosed	is a check for the following amount:		
<u>]</u> \$125.00	Filing Fee S130.00 Filing Fee & S160.00 Filing Fee. Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) S160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Ciifon BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32501		

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

616 SE 4TH AVENUE, LLC

(Must contain 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 Linbility Company is:

Principal Office Address:

Mailing Address:

 14 SE 4th Street, Suite 36
 14 SE 4th Street, Suite 36

 Boca Raton, FL 33432
 Boca Raton, FL 33432

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:

Gross Hoffman PLLC

Nam

14 SE 4th Street, Suite 36

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

 Boca Raton
 FL
 33432

 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 cartificate. 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 695, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

HYDOUGH OF CORPORATION

(((H19000065360 3)))

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Andrew M. Gross
	14 SE 4th Street, Suite 36
	Boca Raten, FL 33432
(Use attachment if necessary)	an of Clina, Enhancer 21, 2010
CLE V: Effective date, if other than the da effective date is listed, the date must be s e of filing.)	ate of filing: February 21, 2019 (OPTIONAL) specific and cannot be more than five business days prior to or 90 days at meet the applicable statutory filing requirements, this date will not be list of State's records.
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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)