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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
Certified Copies Certificates of Status				
Special Instructions to Filing Officer				

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Incorporating Services, Ltd.

3500 S DuPont Highway Dover, DE 19901 302.531.0855

Fax: 302.531.3150 www.Incserv.com

e-mail: accounting@incserv.com



ORDER FORM

TO Florida Department of State

Division of Corporations, Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 corphelp@dos.myflorida.com **FROM**

Melissa Stops

mstops@incserv.com

850.656.7953

REQUEST DATE 4/23/2019

850-245-6051

PRIORITY Routine

OUR REF # (Order ID#) 739174

ORDER ENTITY

3406 S. FLORIDA PARTNERS JESSE, LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

New LLC filing

NOTES:

\$125.00 Authorized

Email address for annual report reminders: radiv@incserv.com

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Tuesday, April 23, 2019 Page 1 of 1

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - 1	Name:				
The name of th	: Limited Liability Company is:				
340	S. Florida Partners Jesse, LLC				
	(Must contain the words "Limited	Liability Company	, "L.L.C.," or "LLC.")		
ARTICLE II -	Address:				
The mailing ad	lress and street address of the principal of	office of the Limite	d Liability Company is:		
	Principal Office Address:		Mailing Address		
	rancipal Office Auti ess.		Mailing Address:		
416 S. Bethlehem Pike		416	416 S. Bethlehem Pike		
Fort Washington, PA 19034-3418		For	Fort Washington, PA 19034-3418		
					
(The Limited L another busine	Registered Agent, Registered Office, ability Company cannot serve as its own is entity with an active Florida registration Florida street address of the registere.	n Registered Agent. on.)	nt's Signature; You must designate an individual or		
	-	-			
	Incorporating Services Ltd.				
		Name			
	1540 Glenway Drive				
	Florida street addres	is (P.O. Box <u>NOT</u> i	acceptable)		
	Tallahassee	FL	32301		
	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..

Renée T. Kent, Assistant Secretary
Rogistered Agent's Signature (REQUIRED)

(CONTINUED)



ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager MGR	Jesse Rappaport 416 S. Bethlehem Pike Fort Washington, PA 19034-3418		
			
			
(Use attachment if necessary)			
RTICLE V: Effective date, if other than the date of filing:	(OPTIONAL)		
f an effective date is listed, the date must be specific an	d cannot be more than five business days prior to or 90 days after		
he 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		
he document's effective date on the Department of State'	••		
RTICLE VI: Other provisions, if any.			
•			
			
REQUIRED SIGNATURE:			
	r an authorized representative of a member.		
This document is executed in acc	condance with section 605.0203 (1) (b), Florida Statutes, ation submitted in a document to the Department of State		
	as provided for in \$.817.155, F.S.		

Eric A. Heinz, Esquire

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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