

L19000179653341

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Fax Number : (850)617-6381

From: Account Name : BUSINESS FILINGS
Account Number : 105256001620
Phone : (608)827-5300
Fax Number : (608)827-5501

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

Email Address: AAJOSEPH3@GMAIL.COM

**FLORIDA LIMITED LIABILITY CO.
Lakeland Corner LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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SECRET

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FAX AUDIT # H1190001796533

**ARTICLES OF ORGANIZATION
OF
Lakeland Corner LLC**

ARTICLE I NAME

The name of the limited liability company is: Lakeland Corner LLC

ARTICLE II ADDRESS

The principal place of business and mailing address of this Limited Liability Company shall be:
550 W 34th St, Suite 2800, New York, New York 10001.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the registered agent are: Business Filings Incorporated, 1200 South Pine Island Road, Plantation, Florida 33324. Located in the County of Broward.

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.

Signature: 
Mark Williams, A.V.P. Business Filings Incorporated

Date: June 5, 2019

ARTICLE IV MANAGERS/MEMBERS

The management of the limited liability company is reserved for the members and the names and addresses of the members of the Limited Liability Company are:
Abraham Joseph, 550 W 34th St, Suite 2800, New York, New York 10001
AnaCristina Aguirre, 550 W 34th St, Suite 2800, New York, New York 10001

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TALLAHASSEE, FLORIDA

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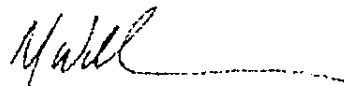
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ARTICLE V DURATION

The duration for the limited liability company shall be: Perpetual.



Abraham Joseph, Organizer

Date: 6/5/2019

Authorized Representative

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

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