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Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : ALEXANDER ALMONTE, ESQ/I INCORPORATE LTD.
Account Number : I20070000019
Phone : (518)689-1212
Fax Number : (518)432-0742

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

Email Address: _____

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RECEIVED
DIVISION OF CORPORATIONS**FLORIDA LIMITED LIABILITY CO.
TS1 SUNNY ISLES BEACH LLC**

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August 22, 2019

FLORIDA DEPARTMENT OF STATE
Division of Corporations

ALEXANDER ALMONTE, ESQ/I INCORPORATE LTD.

SUBJECT: TS1 SUNNY ISLES BEACH LLC
REF: W19000077824

*Corrected!
Thank You!*

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason
Regulatory Specialist II

FAX Aud. #: H19000250899
Letter Number: 219A00017346

Articles of Organization
for
Florida Limited Liability Company

ARTICLE I NAME

The name of the Limited Liability Company is:

TS1 SUNNY ISLES BEACH LLC

ARTICLE II PRINCIPAL OFFICE

The mailing address and street address of the principal office is:

330 Sunny Isles Blvd, Unit TS1, Sunny Isles Beach, FL 33160-5624

ARTICLE III REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

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

Igor Stolyar

330 Sunny Isles Blvd, Unit TS1, Sunny Isles Beach, FL 33160-5624

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..

s/ Igor Stolyar

Igor Stolyar

Registered Agent

ARTICLE IV AUTHORIZED REPRESENTATIVE / MANAGER

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

Igor Stolyar, Authorized Representative

330 Sunny Isles Blvd, Unit TS1, Sunny Isles Beach, FL 33160-5624

August 22, 2019

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

s/ Igor Stolyar

Igor Stolyar

Authorized Representative

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FILED
CLERK OF STATE
DIVISION OF CORPORATIONS