119000251355

(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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Office Use Only



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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee FL 32301

Tallhassee, FL 32301 Phone: 850-558-1500

Phone: 850-558-1500			
ACCOUNT NO. : 12000000195			
REFERENCE : 953806 10910A			
AUTHORIZATION: Spellelena			
COST LIMIT : \$ 125.00			
ORDER DATE : October 10, 2019			
ORDER TIME : 3:51 PM			
ORDER NO. : 953806-005			
CUSTOMER NO: 10910A			

DOMESTIC FILING			
NAME: CLEMATIS 201 LLC			
EFFECTIVE DATE:			
ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION			
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:			
CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING			
CONTACT PERSON: Amanda Robinson - EXT. 62968			
EXAMINER'S INITIALS:			

COVER LETTER

TO: New Filing Section Division of Corporations
SUBJECT: Clematis gol LC Name of Limited Liability Company
The enclosed Articles of Organization and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jonathan Gladstone
Firm/Company
234 Via Linda
Address
Palm Beach, fl 33480
E-mail address/(to be used for future annual report notification)
For further information concerning this matter, please call:
Jonathy Gladstone at (56) 371-7014 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$125.00 Filing Fee \$\ \text{Certificate of Status} \text{S155.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \text{Certified Copy (additional copy is enclosed)}
Mailing Address Street Address
New Filing Section New Filing Section
Division of Compositions

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

CLEMATIS 201Corp. 234 Via Linda Palm Beach, Florida 33480

October 15, 2019

Re: CLEMATIS 201 LLC formation

Please be advised that the undersigned is the sole member and officer of Clematis 201 Corp., a Florida Corporation.

I would like to form a new entity, Clematis 201 LLC, a Florida limited liability company with the sole member of that entity Clematis 201 Corp. I am the sole member and authorized signature for the LLC and the corporation.

Should you require additional information please feel free to contact me.

Very truly yours,

Jonathan Gladstone

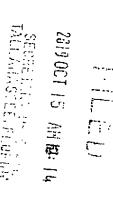
Jonathan Gladstone

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liabil	ity Company is:		
	Clematis 201 L	LC	
(Must con	tain the words "Limited Liability Co	ompany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street a	address of the principal office of the	Limited Liability Company is:	
<u>Princip</u>	oal Office Address:	Mailing Addres	<u>s</u> :
234 Palm	Via Linda Beach, Ht 33480	234 Via Line Palm Beach, Fi	10 - 33480
(The Limited Liability Company another business entity with an		red Agent's Signature: I Agent. You must designate an indiv	idual or
	Name	SIDING I WITCHOLD	WL
-	23	34 Via Linda	
	Florida street address (P.O. Box	NOT acceptable)	n Beach fl
	City State		33480
place designated in this certificate further agree to comply with the p	, I hereby accept the appointment as rovisions of all statutes relating to the	ss for the above stated limited liability registered agent and agree to act in t e proper and complete performance of d agent as provided for in Chapter 60	company at the his capacity. I of my duties, and I

(CONTINUED)

Registered Agent's Signature (REQUIRED)



Title: "AMBR" = Authorized Member "MGR" = Manager	authorized to manage and control the Limited Liability Company: Name and Address:
Solement	Clematic 201 Carp., att. Composition
	Palm Geach, fr. 33480
(Use attachment if necessary)	
(If an effective date is listed, the date must be s the date of filing.)	pecific and cannot be more than five business days prior to or 90 days after meet the applicable statutory filing requirements, this date will not be listed as t of State's records.
REQUIRED SIGNATURE:	deta
This document is execution of the second sec	nember or an authorized representative of a member. ated in accordance with section 605.0203 (1) (b), Florida Statutes, see information submitted in a document to the Department of State see felony as provided for in s.817.155, F.S.
	Mathon Glod Story 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)