# mals5575(Requestor's Name) (Address) 800336593608 (Address) (City/State/Zip/Phone #) PICK-UP WAIT MAIL (Business Entity Name) 11/05/13--01001--014 \*\*265.00 (Document Number) Certified Copies Certificates of Status Special Instructions to Filing Officer: 67 :8 1/2 5 - AUN 61 Office Use Only 2- AON 6182 ETARY OF STATE PH 12: 4 MOV 0.6 2019 K Brumbley

## Sunshine State Corporate Compliance Company 3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 11/4/2019

A.

#### ENTITY NAME RACHEL LEE HOVNANIAN STUDIO, LLC

DOCUMENT NUMBER\_\_\_\_

### \*\*PLEASE FILE THE ATTACHED AND RETURN\*\*

XXXX Plain Copy

Certified Copy Certificate of Status

#### \*\*PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY\*\*

Certified Copy of Arts & Amendments Certificate of Good Standing Cert. Copy of Restated Arts & Amends if available. If not provide Cert. Copy of Arts & Amends.

## \*\*APOSTILLE' / NOTARIAL CERTIFICATION \*\*

TOTAL OWED<sup>\$125</sup>

снеск #6800

Please call Tina at the above number for any issues or concerns. Thank you so much!

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

Rachel Lee Hoynanian Studio, 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 Liability Company is:

Principal Office Address:	Mailing Address:
2925 Flamingo Drivo	2925 Flamingo Drive
Miami Beach, Florida 33140	Miami Beach, Florida 33140

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannol 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:

Rachel Hovnanian		
	Name	
2925 Flamingo Driv	•	
Florida street addres	s (P.O. Box NOT acc	ceptable)
Miami Beach	Florida	33140
City	State	Zlp

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 famillar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.,

Registered Agent's Signature (REQUIRED)

(CONTINUÉD)

Hala NOA -2 by 15: 

ARTICLE IV-

- A

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Rachel Hovnanian
	2925 Flamingo Drive
	Miami Beach, Florida 33140

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_\_. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

<u>Note:</u> If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am fiware 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. Michael Discafani - Authorized Rep 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)