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Name:	43 Denery Lane Development, LLC	
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Thank you!

COVER LETTER

TO:	New Filing Section Division of Corporations		
SUBJE	843 Denery Lane Development, L	LC	
30036		Limited Liabili	у Сотрапу
The end	closed Articles of Organization and fee(s) are submitted	for filing.
Piease 1	eturn all correspondence concerning this	matter to the fo	ollowing:
	Thomas F. Carney, Jr., Esq.		
		Name of	erson
	Carney Stanton P.I		
		Firm/Cor	npany
	135 S.E. 5th Avenue, Suite 202		·
		Addre	SS
	Delray Beach, FL 33483		
	tfc@carneystanton.com	City/State and	Zip Code
	E-mail address: (to be u	sed for future a	nnual report notification)
For furth	er information concerning this matter, pl	ease call:	
	Thomas Carney	561	330-8140
	Name of Person	Area Code	Daytime Telephone Number
Enclose	ed is a check for the following amount:		
]\$ 125.0	0 Filing Fee \$130.00 Filing Fee & Certificate of Status	Certific	O Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

843 Denery Lane Development, LLC	
· (Must contain the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
	of the Limited Liability Company is:
	of the Limited Liability Company is: Mailing Address:
ARTICLE II - Address: The mailing address and street address of the principal office Principal Office Address: 900 East Atlantic Avenue	
The mailing address and street address of the principal office Principal Office Address:	Mailing Address:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or

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

another business entity with an active Florida registration.)

ARTICLE I - Name:

C T Corporation Sys	stem	
	Name	
1200 South Pine Isla	and Road	
Florida street addre	ss (P.O. Box <u>NOT</u> acc	eptable)
Plantation,	Florida	33324
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..

By: Cathy A Childre Ast, Security

Registered Agent's Signature (REQUIRED)

(CONTINUED)

17 ILEU

The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager Athan T. Prakas 900 East Atlantic Avenue, Suite 5 Delray Beach, FL 33483 (Use attachment if necessary) _. (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: ____ (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.) Note: 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 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. THOMAS F. CARNEY, JR. Typed or printed name of signee \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

ARTICLE IV-