# 1\_19000285145

(Requestor's N	ame)
(Address)	
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(City/State/Zip/	Phone #)
PICK-UP WA	IT MAIL
(Business Enti	ty Name)
(Document Nu	mber)
Certified Copies Certif	ficates of Status
Special Instructions to Filing Office	er:





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CORPORATION SERVICE COMPANY 1201 Hays Street

1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

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### COVER LETTER

	iew Filing So Division of Co				
SURIFC	JRL 3RD	AVENUE PROPI			
SUBJEC	••	Na	me of Limited	Liability Company	
The enclos	sed Articles o	f Organization and	fee(s) are sub	mitted for filing.	
Please retu	ım all corresj	ondence concerni	ng this matter	to the following:	
	JACK R. L	OVING, ESQ.			
			N	ame of Person	
	LOVING S	CULLY LAW GR	OUP PLLC		
		·	F	rm/Company	
	1323 SE TI	HIRD AVENUE			
		<del></del>		Address	, <u> </u>
	FORT LAU	JDERDALE, FL 3	3316		
	LACK (SI O)	/INGSCULLY.CO	-	tate and Zip Code	
,				uture annual report notifica	ution)
For further in		oncerning this matt			,
	JACK R. LC	_	954 at (	764-0005	
	Nan	ne of Person	Area C	ode Daytime Telepho	ne Number
Enclosed is	a check for t	the following amou	int.		
	Filing Fee	□\$130.00 Filin Certificate of S	g Fee & l	□\$155.00 Filing Fee & Certified Copy ditional copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F	ng Address Filing Section on of Corporations		Street Address New Filing Section D The Centre of Tallah	
	P.O. B	lox 6327 assee FL 32314		2415 N. Monroe Stro Tallahassee, FL 3230	

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

	PROPERTIES, LLC			
(Must cons	atin the words "Limited Liabi	lity Company	y, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street a	ddress of the principal office	of the Limite	d Liability Company is:	
<u>Princip</u>	al Office Address:	Mailing Address:		
1323 SE THIRD AV	ENUE	132	1323 SE THIRD AVENUE	
FORT LAUDERDA	LE, FL 33316	FO	FORT LAUDERDALE, FL 33316	
	cannot serve as its own Regi			
The Limited Liability Company nother business entity with an a	cannot serve as its own Regi active Florida registration.)	stered Agent.	ent's Signature: You must designate an individual (	
The Limited Liability Company	cannot serve as its own Reginctive Florida registration.)  address of the registered agen	stered Agent.		
The Limited Liability Company nother business entity with an a	cannot serve as its own Regi active Florida registration.)	stered Agent.		
The Limited Liability Company nother business entity with an a	cannot serve as its own Regindrive Florida registration.) address of the registered agent JACK R. LOVING, ESQ.	stered Agent, nt are:		
The Limited Liability Company nother business entity with an a	cannot serve as its own Reginetive Florida registration.)  address of the registered agent JACK R. LOVING, ESQ.  Nan	stered Agent, nt are:	You must designate an individual	
The Limited Liability Company nother business entity with an a	cannot serve as its own Reginctive Florida registration.)  address of the registered agenory  JACK R. LOVING, ESQ.  Nan  1323 SE THIRD AVENU	stered Agent, nt are:	You must designate an individual	

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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

2018 DEC -1, PH 2: 21,

## ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager JACK R. LOVING, ESQ. AMBR 1323 SE THIRD AVENUE FORT LAUDERDALE, FL 33316 N/A N/A N/A (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: N/A . (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.) 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. N/A

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.

JACK R. LOVING

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)

REQUIRED SIGNATURE: