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## FLORIDA FILING & SEARCH SERVICES, INC.

## P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301

PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 12/20/19

NAME: FACTORY TOWN OZF LLC

TYPE OF FILING: ARTICLES

COST:

125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

Obbre Hadge

### COVER LETTER

	ew Filing Section vision of Corporat	ions					
SUBJECT	Factory Town O2	ZF LLC					
300,000	Name of Limited Liability Company						
The enclose	ed Articles of Organ	ization and fee(s) as	re submitted for filing.				
Please retur	n all correspondenc	e concerning this m	atter to the following:				
	Avra Jain						
			Name of Person				
			Firm/Company				
	7272 NE 6th Cour	t, #3					
			Address	-			
	Miami, FL 33138						
j	ainavra@gmail.con		City/State and Zip Code				
	E-mail	address: (to be used	I for future annual report notific	ation)			
For further in	formation concerni	ng this matter, pleas	e call:				
	Avra Jain	3 at (	05 495-1735				
-	Name of Pe		area Code Daytime Teleph	one Number			
Enclosed is	a check for the follo	owing amount:					
\$125.00 Fil	_	0.00 Filing Fee & tificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed			
	Mailing Add New Filing So	ection	Street Address New Filing Section				
	Division of C	Corporations	Division of Corpora	ations			

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

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

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

Λ	RT	CI	F	1.	. N	a n	34
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The name of the Limited Liability Company is:

FILED

2019 DEC 20 AM 9: 21

Factory Town OZF LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

SECRETARY OF STATE TALLAHASSEE, FL

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

<u>Princip</u>	al Office Address:		Mailing Address:
7272 NE 6th Court, a	<del>‡</del> 3		7272 NE 6th Court, #3
Miami, FL 33138	-		Miami, FL 33138
Limited Liability Company	cannot serve as its own	Registered A	gent. You must designate an individual o
er business entity with an a	active Florida registration address of the registered  C T Corporation Syst	agent are: em Name	· .
er business entity with an a	active Florida registration address of the registered C T Corporation Syst	agent are: em Name d Road	
er business entity with an a	active Florida registration address of the registered  C T Corporation Syst	agent are: em Name d Road	
er business entity with an a	active Florida registration address of the registered C T Corporation Syst	agent are: em Name d Road	

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

IJ.	ГI	CI	F	IV.

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

(Use attachment if necessary)  ARTICLE V: Effective date, if other than the date of filing:	Title:	orthonian IM sastan	Name and Address:	
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the date of filing:	"MGR" = Ma		7272 NE 6th Court, #3	
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the date of filing:			SECRITI	2019 DEC 2
If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days a he date of filing.)  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list the document's effective date on the Department of State's records.  ARTICLE VI: Other provisions, if any.  The LLC is formed for the purpose of investing in Qualified Opportunity Zone Property within the meaning of Section 1400Z of the Internal Revenue Code of 1986.  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.  Avra Jain	(Use attachme	nt if necessary)	<u> </u>	A
REOUIRED 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.  Avra Jain	If an effective date is I he date of filing.) <u>Note:</u> If the date insert	isted, the date must be specific an ed in this block does not meet the	applicable statutory filing requirements, this date will not h	-
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		This document is executed in ac I am aware that any false information.	ecordance with section 605.0203 (1) (b), Florida Statutes, ation submitted in a document to the Department of State	
Typed or printed name of signee			d 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)