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GEORGIOS AT THE MONDRIAN, LLC

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## COVER LETTER

	ew Filing S ivision of C	ection orporations			
SUBJECT	Georgios	at the Mondrian, L	I.C		
		Nar	ne of Limited Li	ability Company	<del></del>
The enclos	ed Articles o	of Organization and	fee(s) are submi	ned for filing.	
		pondence concernin			
	Jonathan L	eder			
			Name	of Person	
	Nautilus Lo	egal Services, P.A.			
			Firm	Company	
	150 SE 2nd	I Ave Suite PH-1			
			A	ddress	
	Miami, FL	33131			
•	reorgios@a	eorgioshospitality.c		and Zip Code	
_		·		e annual report notific	ention)
For further in		oncerning this matte		• mindai report notific	action)
	Jonathan Le		305 _at (		
	Nan	ne of Person	Area Code	Daytime Teleph	one Number
Enclosed is	a check for t	he following amour	ıt:		
<b>⊞\$</b> 125.00 I	Filing Fee	□\$130.00 Filing Certificate of Sta	itus Cert	155.00 Filing Fee & ified Copy onal copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		g Address		Street Address	
		iling Section		New Filing Section	
		on of Corporations ox 6327		The Centre of Talla 2415 N. Monroe St	
		assee, FL 32314		Tallahassee, FL 323	

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability	Company is:			
Georgios at the Mond	rlan, LLC			
		Liability Compan	y, "L.L.C.," or "LL.C.")	
ARTICLE II - Address: The mailing address and street add	dress of the principal	office of the Limit	cd Liability Company is:	
<u>Principa</u>	Office Address:		Mailing Addre	<u> 95</u> :
9713 Saratoga Park C			13 Saratoga Park Ct.	
Boca Raton, FL 33428	<u> </u>	<u>Be</u>	oca Raton, FL 33428	
(The Limited Liability Company of another business entity with an action The name and the Florida street actions are the street actions and the Florida street actions are the street actions and the Florida street actions are the	tive Florida registration	on.) d agent are:		
	150 SE 2nd Ave Sui			
	Florida street addres	ss (P.O. Box <u>NOT</u>	acceptable)	
	Miami	FL	33131	
	City	State	Zip	
Having been named as registered ag place designated in this certificate, I further agree to comply with the prot am familiar with and accept the oblig	hereby accept the app visions of all statutes r gations of my position	ointment as registe elating to the prop as registered agen	ered agent and agree to act in er and complete performance t as provided for in Chapter 60 aturc (REQUIRED)	this capacity. I

2020 JAH 29 PH 3: 24

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address;
MGR	Georgios Vogiatzis
	9713 Saratoga Park Ct.
	Boca Raton, FL 33428
creetive date is usted, the date must	e date of filing: (OPTIONAL) be specific and cannot be more than five business days prior to or 90 days a
ICLE V: Effective date, if other than the effective date is listed, the date must late of filing.)	not meet the applicable statutory filing requirements, this date will not be lied
ICLE V: Effective date, if other than the effective date is listed, the date must late of filing.)  If the date inserted in this block does ocument's effective date on the Departs	not meet the applicable statutory filing requirements, this date will not be lied
ICLE V: Effective date, if other than the effective date is listed, the date must late of filing.)  If the date inserted in this block does occument's effective date on the Department of the CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:	not meet the applicable statutory filing requirements, this date will not be list ment of State's records.
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