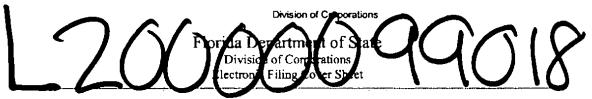
4/8/2020



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : FELDMAN & ASSOCIATES

Account Number : 128130080018
Phone : (385)931-8433
Fax Number : (866)856-1462

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: paul@feldmanclosings.com

TALLAHASSEE, FLANDA

FLORIDA LIMITED LIABILITY CO.

Venice Park 26, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company is:	
Venice Park 26, LLC	
(Must conatin the words "Limited Liabilit	y 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:
122 Golden Beach Drive	122 Golden Beach Drive
Golden Beach, FL 33160	Golden Beach, FL 33160
	<u></u>
ARTICLE III - Registered Agent, Registered Office, & Reg (The Limited Liability Company cannot serve as its own Regist another business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent	are:
Paul Feldman, P.A.	
Nim	<del></del>

2750 NE 185th Street, Suite 203 Florida street address (P.O. Box NOT acceptable) Aventura 33180 Cly 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 Fis 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 Tapts 605, FS

(CONTINUED)

YANIV ŞANANEŞ 122 Golden Beach Drive Golden Beach, FL 33160
filing:

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.

Paul Feldman, Esq.

Typed or printed name of signe

## 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)