L20000123547

| (Re | equestor's Name) | |
|-------------------------|--------------------|---------------------------------------|
| (Ac | idress) | |
| (Ac | ddress) | · · · · · · · · · · · · · · · · · · · |
| (Ci | ty/State/Zip/Phone | ÷ #) |
| PICK-UP | ☐ WAIT | MAIL MAIL |
| (Bi | siness Entity Nam | ne) |
| (Do | ocument Number) | |
| Certified Copies | _ Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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Office Use Only



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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

| 701 NE 4 ST, LLC | | |
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| | | |
| | | |
| | | Art of Inc. File |
| <u> </u> | | LTD Partnership File |
| | | Foreign Corp. File |
| | | L.C. File |
| | | Fictitious Name File |
| | | Trade/Service Mark |
| | | Merger File |
| | | Art, of Amend, File |
| | | RA Resignation |
| | | Dissolution / Withdrawal |
| | | Annual Report / Reinstatement |
| | | Cert. Copy |
| | | ✓ Photo Copy |
| | | Certificate of Good Standing |
| | | Certificate of Status |
| | | Certificate of Fictitious Name |
| | | Corp Record Search |
| | | Officer Search |
| | | Fictitious Search |
| Signature | | Fictitious Owner Search |
| J.g.iatore | | Vehicle Search |
| | | Driving Record |
| Requested by: BA | 05/11/20 | UCC 1 or 3 File |
| Name | Date Time | UCC 11 Search |
| | | UCC II Retrieval |
| Walk-In | Will Pick Up | Courier |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| | 701 | NE 4 ST, LLC | |
|--|---|--|--|
| (Must contai | n the words "Limited | Liability Company, | "L.L.C.," or "LLC.") |
| CLE II - Address: | | | • |
| ailing address and street add | ress of the principal | office of the Limited | Liability Company is: |
| | Office Address: | | Mailing Address: |
| | | | |
| | | | NIC Day Jala Dalan |
| 815 NE Bay Isle Drive | 487 | | NE Bay Isle Drive |
| Boca Raton, Florida 33 CLE III - Registered Agent | 487 , Registered Office, | & Registered Agent N | Raton, Florida 33487 |
| Boca Raton, Florida 33 CLE III - Registered Agent imited Liability Company car business entity with an act | 487 , Registered Office, unnot serve as its own ive Florida registration | & Registered Agent, Von.) | Raton, Florida 33487 |
| Boca Raton, Florida 33 CLE III - Registered Agent imited Liability Company car business entity with an act | t, Registered Office, annot serve as its own ive Florida registration dress of the registered | & Registered Agent, Von.) | Raton, Florida 33487 |
| Boca Raton, Florida 33 CLE III - Registered Agent imited Liability Company car business entity with an act | t, Registered Office, annot serve as its own ive Florida registration dress of the registered | & Registered Agent. Son.) | Raton, Florida 33487 |
| Boca Raton, Florida 33 CLE III - Registered Agent cimited Liability Company car business entity with an act | 487 A, Registered Office, annot serve as its own ive Florida registration dress of the registered Ma | & Registered Agent, Yon.) I agent are: | Raton, Florida 33487 |
| Boca Raton, Florida 33 CLE III - Registered Agent imited Liability Company can business entity with an act ime and the Florida street add | 487 A, Registered Office, annot serve as its own ive Florida registration dress of the registered Ma | & Registered Agent. Son.) I agent are: rk A. Warren Name NE Bay Isle Drive | Raton, Florida 33487 t's Signature: You must designate an individual o |
| Boca Raton, Florida 33 CLE III - Registered Agent imited Liability Company can business entity with an act ime and the Florida street add | 487 A, Registered Office, annot serve as its own ive Florida registration dress of the registered Ma | & Registered Agent. Son.) I agent are: rk A. Warren Name NE Bay Isle Drive | Raton, Florida 33487 t's Signature: You must designate an individual o |

Ha pla 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.

A98AFB832E894Registered Agent's Signature (REQUIRED)

(CONTINUED)

| Title: "AMBR" = Authorized Members "MGR" = Manager | Name and Address: |
|--|---|
| AMBR | Mark A. Warren |
| | 815 NE Bay Isle Drive Boca Raton, Florida 33487 |
| | Boca Raton, Ptorida 3348/ |
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| (Use attachment if necessary) LE V: Effective date, if other tha | n the date of filing: |
| LEV: Effective date, if other that ffective date is listed, the date me of filing.) | loes not meet the applicable statutory filing requirements, this date will not be |
| LEV: Effective date, if other than a ffective date is listed, the date in sofflling.) If the date inserted in this block of the date inserted in the Decument's effective date on the Decument's | ust be specific and cannot be more than five business days prior to or 90 day does not meet the applicable statutory filing requirements, this date will not be |
| LE V: Effective date, if other that fective date is listed, the date me of filing.) If the date inserted in this block cument's effective date on the De LE VI: Other provisions, if any. REQUIRED SECTIONS | ust be specific and cannot be more than five business days prior to or 90 day does not meet the applicable statutory filing requirements, this date will not be partment of State's records. |
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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)