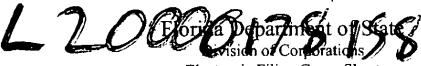
7/1/2020

Division of Corporations



Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H200002052073)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : BUSINESS FILINGS Account Number : 105256001620 Phone : (608)827-5300 Fax Number : (608)827-5501

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

Email Address: kfranco@ccmcgs.com

## FLORIDA LIMITED LIABILITY CO. City Nights Ave, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu Corporate Filing Menu

Help

FAX AUDIT#_	H20000205207 3	

## ARTICLES OF ORGANIZATION OF City Nights Ave, LLC

**ARTICLE I** 

NAME

The name of the limited liability company is: City Nights Ave, LLC

ARTICLE II

**ADDRESS** 

The principal place of business and mailing address of this Limited Liability Company shall be: 615 E Harding Street, Orlando, Florida 32806.

## ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the registered agent are: Business Filings Incorporated, 1200 South Pine Island Road, Plantation, Florida 33324. Located in the County of Broward.

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.

Mull		<u> </u>
Signature:  Mark Williams, A.V.P. Business Filings Incorporated	Date: June 26, 2020	*

## ARTICLE IV MANAGERS/MEMBERS

The management of the limited liability company is reserved for the members and the name and address of the member of the Limited Liability Company is:

Craig Mateer, 615 E Harding Street, Orlando, Florida 32806

FAX AUDIT #	H20000205207 3

FAX AUDIT #	H20000205207 3	<del></del>
ARTICLE V	DURATION	
The duration for th	e limited liability company	shall be: Perpetual.
Craig Mateer, Org	anizer	Date: June 30 th 2020
Authorized Repres	sentative	
constitutes an affirmat I am aware that any fa	ion under the penalties of perjury	atutes, the execution of this document that the facts stated herein are true. cument to the Department of State 7.155, F.S.)

FAX AUDIT # \_\_\_\_\_