Division of Corporations

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To:

Division of Corporations

Fax Number : (850)617-6381

from:

Account Name : FL PATEL LAW PLLC Account Number : I20170000097 Phone : (727)279-5037 Fax Number : (727)888-1294

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

Email Address: danfi57@gmail.com

FLORIDA LIMITED LIABILITY CO.

Practice Succession Solutions LLC

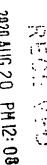
Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

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COVER LETTER

Tuesday, August 18, 2020

To: New Filing Section
Division of Corporation

Subject: Practice Succession Solutions LLC Name of Limited Liability Company

The enclosed Articles of Organization and Fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:

FL Patel Law PLLC

360 Central Avenue 8th Floor St. Petersburg, Florida 33701 Fax: 727-888-1294

For further information concerning this matter, please call or e-mail:

Kalpesh Patel at 727-279-5037 or e-mail at Contact@flpatellaw.com

Enclosed is our fax filing coversheet for \$130.00 for Filing Fee & Certificate of Status

FL Patel Law PLLC

17278881294

ARTICLES OF ORGANIZATION

FOR

Practice Succession Solutions LLC

A

Florida Limited Liability Company

ARTICLE I.

Name

The name of the Limited Liability Company is: Practice Succession Solutions LLC (the Company).

ARTICLE II.

Address

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

4604 49th Street North Suite 1239 Saint Petersburg, Florida 33709

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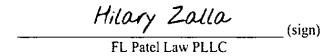
ARTICLE III.

Registered Agent, Registered office, & Registered Agent's Signature

The name and the Florida Street Address of the Registered Agent are:

FL Patel Law PLLC 360 Central Avenue Suite 800 Saint Petersburg, Florida 33701

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.



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ARTICLE IV. **Authorized Members and Managers**

The Name and Address of each person authorized to manage and control the Limited Liability Company:

<u>Title</u>	Name and Address
AMBR = Authorized Member MGR = Manager	
MGR	Daniel Jones 4604 49th Street North Suite 1239 Saint Petersburg, Florida 33709

ARTICLE V.

The Effective date shall be the date of filing.

Daniel F. Jones (sign)

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.

Daniel Jones Authorized Representative/Member

1/005

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Division of Corporations

Page 1 of 2

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Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : GREENSPOON MARDER, P.A.

Account Number: 076064003722 Phone : (888)491-1120 Fax Number : (954)333-4242

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

deb.nihlser@gmlaw.com Email Address:__

FLORIDA LIMITED LIABILITY CO. Masayuki LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

Electronic Filing Menu Corporate Filing Menu

Help

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ARTICLES OF ORGANIZATION OF MASAYUKI LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Revised Limited Liability Company Act, Florida Statutes Chapter 605, as amended, hereby makes, acknowledges and files the following Articles of Organization.

ARTICLE I - Name:

The name of the Limited Liability Company is Masayuki LLC.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is 1120 Redwood Street, Hollywood, Florida, 33019.

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall begin with the filing of these Articles with the Florida Department of State, and shall exist perpetually, unless sooner dissolved in accordance with the Operating Agreement of the Limited Liability Company or Florida law.

ARTICLE IV - Registered Agent:

The name and street address of the initial registered agent for this Limited Liability Company is Alan B. Cohn, Greenspoon Marder LLP, 200 East Broward Blvd, Suite 1800, Fort Lauderdale, Florida 33301.

ARTICLE V — Management:

The Limited Liability Company is to be managed by managers and the names and addresses of the initial managers who are to serve as managers are:

Liora Polichuk 1120 Redwood St Hollywood Florida, 33019

The managers of this Limited Liability Company: (i) may be replaced by the members, and (ii) shall be elected by the members.

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Whereof, the undersigned has executed these Articles thas 19th day of August, 2020.

Alan B. Cohn, Esq.

Authorized Representative of Member

(((H20000288607 3)))

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: Masayuki LLC.
- 2. The name and address of the registered agent and office is:

Greenspoon Marder LLP (the "Firm") 200 E. Broward Blvd., Suite 1800 Fort Lauderdale, FL 33301

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, the Firm hereby accepts the appointment as registered agent and agree to act in this capacity. The Firm further agrees to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and the Firm is familiar, with and accept the obligations of its position as registered agent.

Alan B. Cohn, Esq., For the Firm

(Signature)

August 19, 2020 Date