10/12/2020

Division of Corporations

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To:

Division of Corporations

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From:

Account Name

C T CORPORATION SYSTEM

Account Number :

FCA600000023

Phone

(614)280-3338 (954)208-0845

Fax Number

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

Email Address:\_

## FLORIDA LIMITED LIABILITY CO. DEVELORMENT SEVEN, LLC

Certificate of S	tatus	0
Certified Copy		1
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Estimated Char	ge	\$155.00

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Corporate Filing Menu

Help



The undersigned, acting as the authorized representative of the organizing member of a limited liability company under the Forida Revised Limited Liability Company Act, adopts the following Articles of Organization for such limited liability company (the "Company"):

## ARTICLE I Name

The name of the limited hability company is Development Seven, LLC.

## ARTICLE II Principa Office and Mailing Address

The principal office address and the mailing address of the Company is 240 South Quadrille Blvd., West Palm Beach, FL 33401.

## ARTICLE III Initial Registered Agent and Office

The street address of the initial registered office of the Company is 1200 South Pinc Island Road, Plantation, Florida 33324, and the name of its initial registered agent at that address is CT Corporation System.

ARTICLE IV
Management

The Company shall be manager-managed.

ARTICLE V Effective Date

The effective date of filing of these Articles of Organization shall the date of filing.

Dated this 12th day of October, 2020.

By: /s/ Haley R. Ayure
Haley R. Ayure, Sole Organizer

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#### ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent and to accept service of process for Development Seven, LLC, at the place designated as the registered office, the undersigned hereby accepts the appointment as registered agent and agrees to act in such capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of the undersigned's duties, and the undersigned is familiar with and accepts the duties and obligations of the undersigned's position as registered agent.

Dated this / 2 day of October, 2020.

REGISTERED AGENT:

CT CORPORATION SYSTEM

Name: Kathryn A. Wid

Title: Authorized Agent

#### **FAX COVER SHEET**

TO			
COMPANY			
FAX NUMBER	185061763	β1	
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#### **COVER MESSAGE**

Sabra Dudding Global Fulfillment Coordinator CT Corporation

Team (614) 280-3338 GlobalFulfillmentTeam@wolterskluwer.com sabra.dudding@wolterskluwer.com



#### Wolters Kluwer

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