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.

(((H20000357142 3)))



H200003571423ABCY

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

: RABIDEAU KLEIN

Account Number : 120200000035

Fax Number

: (561)655-6221 : (561)655-3221

**Enter the email address for this business entity to be used for future

annual report mailings. Enter only one email address please.**

FLORIDA LIMITED LIABILITY CO. 220 PB, LLC

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$160.00

J. FASON

OCT 15 2020

COVER LETTER

	ivision of Cor					
SUBJECT	220 PB, LI	.c				
SOBJECT	. <u></u>	Name	of Limite	d Liabili	ty Company	
The enclos	sed Articles of	Organization and fe	c(s) arc s:	ubmitted	for filing.	
Please retu	un all correspo	ondence concerning t	his matte	r to the fo	ollowing:	
	Guy Rabidea	u			•	
				Name of	Person	
	Rabideau Kl	ein				
				Firm/Co	npany	
	440 Royal Pa	alm Way, Suite 101				
				Addre	225	
	Palm Beach,	PL 33480	;			
	grahideau@ra	bideauklein.com	City	State and	l Zip Code	
			c used fo	r future a	nnual report notificati	on)
For further i	information co	ncerning this matter,	please ca	all:		
	Garrett Ellis		561 at (655-6221	
	Nam	e of Person		Code	Daytime Telephon	e Number
Enclosed i	s a check for th	ne following amount	:			
□ \$ 125.00) Filing Fee	S130.00 Piling Certificate of Stat	tus	Certific	5.00 Filing Fee & ed Copy al copy is enclosed)	### \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		g Address iling Section			Street Address New Filing Section Di	ivision
	Divisio	on of Corporations		•	The Centre of Tallaha	issec
		ox 6327			2415 N. Monroe Stree Pollohossee Ft. 3230	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

220 PB, LLC			
	onatin the words "Limited	Liability Company,	'L.L.C.," or "LLC.")
TICLE II - Address:			
mailing address and stree	t address of the principal of	office of the Limited	Liability Company is:
<u>Princ</u>	cipal Office Address;		Mailing Address:
235 Banyan Road		235]	Sanyan Road
Palm Beach, FL 3	3480	Palm	Beach, FL 33480
e Limited Liability Compa		n Registered Agent, N	t's Signature; You must designate an individual
e Limited Liability Compa ther business entity with a	any cannot serve as its own an active Plorida registration eet address of the registere	n Registered Agent, Yon.)	
e Limited Liability Compa ther business entity with a	any cannot serve as its own an active Plorida registration	n Registered Agent, Yon.)	
e Limited Liability Compa ther business entity with a	any cannot serve as its own an active Plorida registration eet address of the registere Guy Rabideau 440 Royal Palm Wa	n Registered Agent. Yon.) d agent are: Name	ou must designate an individual
e Limited Liability Compa ther business entity with a	any cannot serve as its own an active Plorida registration eet address of the registere Guy Rabideau 440 Royal Palm Wa	n Registered Agent. Yon.) d agent are: Name y, Suite 101	ou must designate an individual

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.,

Registered Agent's Signature (REQUIRED)

(CONTINUED)

2020 OCT 14 AM 10: 24

ARTICLE IV-

Title:	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
MGR	Richard Kurtz	
	235 Banvan Road	_
	Palm Beach, FL 33480	•
		_
		-
		-
		_
		•
		_
		-
		-
(Use attachment if necessary)		
•	date of filing: (OPTIONAL)	
EV: Effective date, if other than the	date of filing; (OPTIONAL) se specific and cannot be more than five business days prior to or 90	dav:
EV: Effective date, if other than the	date of filing: (OPTIONAL) se specific and cannot be more than five business days prior to or 90	day:
EV: Effective date, if other than the ective date is listed, the date must but filling.) the date inserted in this block does	ne specific and cannot be more than five business days prior to or 90 not meet the applicable statutory filing requirements, this date will not	
E V: Effective date, if other than the ective date is listed, the date must b	ne specific and cannot be more than five business days prior to or 90 not meet the applicable statutory filing requirements, this date will not	
EV: Effective date, if other than the ective date is listed, the date must but filling.) the date inserted in this block does ment's effective date on the Department.	ne specific and cannot be more than five business days prior to or 90 not meet the applicable statutory filing requirements, this date will not	
E V: Effective date, if other than the ective date is listed, the date must but filing.) the date inserted in this block does	ne specific and cannot be more than five business days prior to or 90 not meet the applicable statutory filing requirements, this date will not	
E V: Effective date, if other than the ective date is listed, the date must but filling.) the date inserted in this block does ment's effective date on the Department's	ne specific and cannot be more than five business days prior to or 90 not meet the applicable statutory filing requirements, this date will not	
E V: Effective date, if other than the ective date is listed, the date must be filling.) the date inserted in this block does ment's effective date on the Department's	ne specific and cannot be more than five business days prior to or 90 not meet the applicable statutory filing requirements, this date will not	
E V: Effective date, if other than the ective date is listed, the date must but filling.) the date inserted in this block does ment's effective date on the Department's	not meet the applicable statutory filing requirements, this date will not ment of State's records.	
EV: Effective date, if other than the ective date is listed, the date must but filling.) the date inserted in this block does ment's effective date on the Department's Country of the Department's effective date on the Department's effective date.	not meet the applicable statutory filing requirements, this date will not ment of State's records.	
E V: Effective date, if other than the ective date is listed, the date must but filling.) the date inserted in this block does ment's effective date on the Department's	not meet the applicable statutory filing requirements, this date will not ment of State's records.	
E V: Effective date, if other than the extive date is listed, the date must but filling.) the date inserted in this block does ment's effective date on the Department's Other provisions, if any. REOUIRED SIGNATURE:	not meet the applicable statutory filing requirements, this date will not ment of State's records.	2020 DCT 4
E V: Effective date, if other than the ective date is listed, the date must but filling.) the date inserted in this block does ment's effective date on the Department's Other provisions, if any. REOUIRED SIGNATURE:	not meet the applicable statutory filing requirements, this date will not ment of State's records. Amendment of an authorized representative of a member.	2020 DCT 4
E V: Effective date, if other than the extive date is listed, the date must be of filing.) the date inserted in this block does ment's effective date on the Department's effective date on the Department's Other provisions, if any. REOUIRED SIGNATURE: Signature of This document is experienced.	a member or an authorized representative of a member. Executed in accordance with section 605.0203 (1) (b), Florida Statutes.	
E V: Effective date, if other than the ective date is listed, the date must be of filing.) the date inserted in this block does ment's effective date on the Department's effective date on the	a member or an authorized representative of a member. Executed in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State.	2020 OCT IL AMIO:
E V: Effective date, if other than the ective date is listed, the date must be of filing.) the date inserted in this block does ment's effective date on the Department's effective date on the	a member or an authorized representative of a member. Executed in accordance with section 605.0203 (1) (b), Florida Statutes. false information submitted in a document to the Department of State egree felony as provided for in s.817.155, F.S.	2020 DCT 4

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)