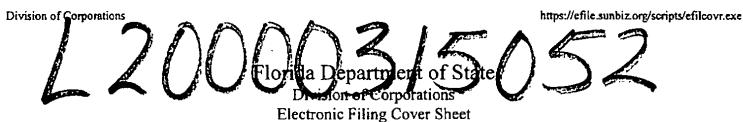
To:



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.

(((H20000357625 3)))



H200003576253ABC/

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 : FILE RIGHT LLC Account Number : I20170000091 : (718)878-5811 : (718)732-4580 Fax Number

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

Email Address: sales@fileacorp.com

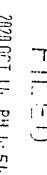
## FLORIDA LIMITED LIABILITY CO. QUINTA VILLA LLC

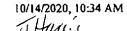
Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help





fax reference: H20000357625 3

## **COVER LETTER**

of 5	• '	2020-10-14 14:39:41 (GMT)	17187959036 From: Mark F
ence: H20000	357625 3		2020 OCT 14 PH 4:54
		COVER LETTER	The state of the s
TO:	New Filing Section Division of Corporations		54
SUBJE	CT:		
	Na	me of Limited Liability Company	
The enc	closed Articles of Organization and	f fee(s) are submitted for filing.	
Please r	eturn all correspondence concerni	ng this matter to the following:	
		Name of Person	
	FILE RIGHT LLC		
		Firm/Company	
	5314 16TH AVENUE SUITI	E 139	
		Address	
	BROOKLYN, NY 11204		
	sales@fileacorp.com	City/State and Zip Code	
For firsth	E-mail address: (	ter please call:	n)
r or tarriv	RACHEL	718 878-5811	
	Name of Person	Area Code Daytime Telephone	Number
Enclose	ed is a check for the following amo	ount:	
\$125.00	0 Filing Fee \$130.00 Filing Certificate of		\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporation P.O. Box 6327 Tallahassee, FL 32314	Street Address New Filing Section Division of Corporation Clifton Building 2661 Executive Center	

Tallahassee, FL 32301

To:

fax reference: H20000357625 3

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE II - Name: The name of the Limited Liability Company is: QUINTA VILLA LLC (Must contain the words "Limited Liability Company, "L.L.C.," or "LL.C.," or

The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

<b>BUSINESS FILING</b>	SINCORPORATE	D
	Name	
1200 SOUTH PINE	ISLAND ROAD	
Florida street address	s (P.O. Box <u>NOT</u> ac	rceptable)
PLANTATION	FL	33326
City	State	Zip

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..

Chalcia Caulego Ast Sec. Brainess Filings Treorporated
Registered Agent's Signature (REQUIRED)

(CONTLNUED)

2020 OCT 1 1 PH 1: 54

fax reference: H20000357625 3

ARTICLE IV-

Title:	Name and Address:				
	uthorized Member				
"MGR" = Ma					
MGR_	MENDEL STEINER				
	4403 15TH AVENUE, SUITE 192 BROOKLYN, NY 11219				
	DROOKETN, NT 11219				
-					
TOP TOWALL					
I E V. Effectiv	e date, if other than the date of filing: (OPTIONAL)				
LEV: Effectiv	e date, if other than the date of filing: (OPTIONAL)				
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\$ 5.00 Certificate of Status (Optional)