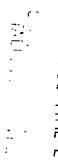
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(Requestor's Name)
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DIVISION OF CORPORATIONS TALLAHASSEE, FLORIDA

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : I2000000195 AUTHORIZATION : COST LIMIT : \$ 125.00 ORDER DATE: October 29, 2020 ORDER TIME : 10:02 AM ORDER NO. : 492725-005 CUSTOMER NO: 7354176 DOMESTIC FILING ANTHONY AND HEIDI GOLD NAME: INVESTMENTS LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: __ CERTIFIED COPY XX PLAIN STAMPED COPY ____ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Lydia Cohen - EXT. 62974

EXAMINER'S INITIALS:

COVER LETTER

	ew Filing Se ivision of Co						
SUBJECT	ANTHONY AND HEIDI GOLD INVESTMENTS LLC						
30202001	Name of Limited Liability Company						
The enclos	ed Articles o	f Organization and	fee(s) are	submitte	d for filing.		
Please retu	rn all corresp	ondence concernir	ng this mat	tter to the	following:		
	Stuart W. G	ioldstein					
		-		Name o	f Person		
	Levine Plot	kin & Menin ELP					
	Firm/Company						
	888 Seventh	n Avenue, 10th Flo	юг, NY, N	Y 10106			
				Add	ress		
	New York,	NY 10106					
		····	Ci	ty/State ar	nd Zip Code		
-	sgoldstein@l	<u> </u>		c e			
		•			annual report notificati	on)	
For further in	nformation co	oncerning this matt	er, please	call:			
	Stuart W. Go	oldstein	213 at (245-6565		
	Nan	ne of Person	Ar	ea Code	Daytime Telephone	e Number	
Enclosed is	a check for t	the following amou	ınt:				
■\$ 125.00		□\$130.00 Filin Certificate of S	ng Fee &	Certif	i5.00 Filing Fee & ied Copy nal copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314			;		Street Address New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must	conatin the words "Limited Liab			
		bility Company,	"L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and stre	et address of the principal office	e of the Limited	Liability Company is:	
<u>Pri</u>	ncipal Office Address:		Mailing Address:	
1500 Ocean Driv	re, #502	1500 Ocean Drive, #502		
Miami Beach, Fl	33130-3160	Miar	Miami Beach, FL 33139-3160	
ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, & Foany cannot serve as its own Repair an active Florida registration.)	Registered Agen	it's Signature: You must designate an individual c	
ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, & Foany cannot serve as its own Rejan active Florida registration.)	Registered Agen	nt's Signature: You must designate an individual o	
ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, & Foany cannot serve as its own Registration.) reet address of the registered age Anthony Gold	Registered Agen	at's Signature: You must designate an individual o	
ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, & Foany cannot serve as its own Registration.) reet address of the registered age Anthony Gold	Registered Agent. Y gent are:	nt's Signature: You must designate an individual o	
ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, & Foany cannot serve as its own Registration.) reet address of the registered age Anthony Gold	Registered Agent. Sent are:	You must designate an individual o	
ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, & Foany cannot serve as its own Registration.) reet address of the registered age Anthony Gold No. 1500 Ocean Drive, #502	Registered Agent. Sent are:	You must designate an individual o	

am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Anthony Gold

(CONTINUED)

Registered Agent's Signature (REQUIRED)

2020 OCT 30 PH I2: 21

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
AMBR	Anthony Gold 1500 Ocean Drive, #502 Miami Beach, FL 33139-3160
AMBR	Heidi Gold 1500 Ocean Drive, #502 Miami Beach, FL 33139-3160
(Use attachment if necessary)	
(If an effective date is listed, the date must be sithe date of filing.)	pecific and cannot be more than five business days prior to or 90 days after meet the applicable statutory filing requirements, this date will not be listed as t of State's records.
ARTICLE VI: Other provisions, if any.	
	nember or an authorized representative of a member. uted in accordance with section 605.0203 (1) (b), Florida Statutes.
l am aware that any fal	se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S.
Anthony Gold	Typed or printed name of signee

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)