-20000364926

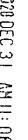
	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
	PICK-UP WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certif	led Copies Certificates of Status
Spe	cial Instructions to Filing Officer:
	Office Use Only



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12/01/20--01009+-011 **129.00





CAPITAL CONNECTION, INC.	
417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301	•
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222	•
Executive Ray Realty, LLC	
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art, of Amend, File
	RA Resignation
	Dissolution / Withdrawa)
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
<u> </u>	Vehicle Search
	Driving Record
Requested by: Seth 11/30/20	UCC 1 or 3 File
Name Date Time	UCC 11 Search
	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

COVER LETTER

	New Filing Sec Division of Co					
SUBJEC		Ray Realty, LLC				
000420		Name	of Lim	nited Liabili	ty Company	
The enclo	osed Articles of	Organization and fe	:e(s) are	submitted	for filing.	
Please ret	turn all correspo	ondence concerning	this ma	tter to the f	ollowing:	
	John C. Goe	de, Esq.				
	<u> </u>			Name of	Person	
	Goede, Ada	mczyk, DeBoest, &	Cross,	PLLC		
				Firm/Co	праяу	
	6609 Willov	v Park Drive, Secon	d Floor			
	.			Addr	#SS	
	Naples, FL	34109				
	sbedyan@gad	lclaw.com	Ci	ity/State and	d Zip Code	
			e used	for future a	nnual report notificati	on)
or further	information co	neerning this matter	, please	call;		
	Susan L. Bed	lyan	23 at (331-5100 Extensio	n 105
	Nam	e of Person		rea Code	Daytime Telephon	e Number
Enclosed	is a check for t	he following amoun	t:			
□\$125.0	0 Filing Fee	□\$130.00 Filing Certificate of Sta		Certifie	5.00 Filing Fee & ed Copy il copy is enclosed)	C\$160 00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		g Address			Street Address	
		iling Section on of Corporations			New Filing Section Di The Centre of Tallaha	
		ox 6327			2415 N. Monroe Stre	
	Tallah	assce, FL 32314			Tallahassee, FL 3230	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Company is:			
,,,			
LLC			
	nited Liability Cor	npany, "L.L.C.," or "LLC."))
dress of the princi	pal office of the L	imited Liability Company is	s:
l Office Address	:	Mailing A	Address:
		32 Winding Lane	
5		Glen Head, NY 11545	
<u>-</u>			
cannot serve as its ctive Florida regis ddress of the regis	own Registered A Iration.) stered agent are:	Agent. You must designate a	n individual or
	Name	-	-
6609 Willow Pa	irk Drive, Second	Floor	
			-
Naples	F1 34 109		_
City	State	Zip	_
l hereby accept the wisions of all state igations of my pos	e appointment as r ites relating to the ition as registered egistered Agent's	egistered agent and agree to proper and complete perfori gænt as provided for in Cha Signature (REQUIRED)	act in this capacity. I mance of my duties, and t
	oldress of the principal Office Address Int., Registered Office Address Int., Registered Office annot serve as its cive Florida regis ddress of the regis ddress of the regis John C. Goede, 6609 Willow Para Florida street and Naples City Gent and to accept the ovisions of all statulinguions of my postinguions of	in the words "Limited Liability Conditions of the principal office of the Late	in the words "Limited Liability Company, "L.L.C.," or "LLC." Idress of the principal office of the Limited Liability Company is I Office Address: Mailing A 32 Winding Lane Glen Head, NY 11545 Int, Registered Office, & Registered Agent's Signature: cannot serve as its own Registered Agent. You must designate a crive Florida registration.) ddress of the registered agent are: John C. Goede, Esq. Name 6609 Willow Park Drive, Second Floor Florida street address (P.O. Box NOT acceptable) Naples Fl 34109

2020 DEC 31 AM 11: 06

	Name and Address:
"MGR" = Manager	•
MGR	Raymond Nouvahian 32 Winding Lane
	Glen Head, NY 11346
AMBR	Emmanuel Hovrizadeh
	32 Winding Lane Glen Head NY 11545
	1.3
2 AM.	specific and cannot be more than five business days prior to or 9
the date inserted in this block does no ment's effective date on the Departmen	t most the applicable statutory filing requirements, this date will no nt of State's records.
the date inserted in this block does no ment's effective date on the Departmen	t most the applicable statutory filing requirements, this date will not of State's records.
the date inserted in this block does no ment's effective date on the Department E VI: Other provisions, if any.	nt of State's records.
E VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a This document is exert am aware that any fa	member or an authorized representative of a member. The intermediate in a document to the Department of State is feeling a provided for in \$8.817.155, F.S.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)