# L20000372352

(Requestor's Name)
(A) (A)
(Address)
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(Ĉity/State/Žip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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200 DEC -7 AM 8: 54
SEGRETARY OF STATE
TALLAHASSEE, FL

:..

### Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com



#### **ORDER FORM**

The Centre of Tallahassee

2415 North Monroe Street, Suite 810

Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

**FROM** Melissa Stops

mstops@incserv.com

850.656.7953

R	<b>EQ</b> l	JEST	DAT	E   1	2/4/	2020

**PRIORITY** Routine

OUR REF\_#\_(Order\_ID#) 874304

#### ORDER ENTITY\_\_\_\_

TERRACES 406 HOLDINGS LLC

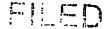
PLEASE PERFORM THE FOLLOWING SERVICES: TERRACES 406 HOLDINGS LLC (FL)		 	
New LLC filing			
		 	<u> </u>
NOTES:		 	
\$125.00 Authorized			
Email address for annual report reminders: drogers@ste	llarcs.com		
RETURN/FORWARDING INSTRUCTIONS:		 	
ACCOUNT NUMBER: I20050000052		 	
Diagram hill the above reference to the second seco			
Please bill the above referenced account for this order.			
If you have any questions plants contact me at CEC 705	c		

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Friday, December 4, 2020 Page 1 of 1



## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY DEC -7 AM 8: 55

Ā	R.	П	CI	LE	1	-	N	a mie	:

The name of the Limited Liability Company is:

SECRETARY OF STATE TALLAHASSEE, FL

TALLAHASSE
y Company, "L.L.C.," or "LLC.")
f the Limited Liability Company is:
Mailing Address:
15805 Biscayne Blvd, Ste 305
North Miami Beach, FL 33160
<del></del>
istered Agent's Signature: tered Agent. You must designate an individual or

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

Elliot Sohayegh		
ì	Name	
15805 Biscayne Blvd,	Ste 305	
Florida street address (	P.O. Box <u>NOT</u> ac	eceptable)
North Miami Beach	FL	33160
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..

(CONTINUED)

AR	ric	LL	ΕI	V.
.1.1				

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

Elliot Sohayegh 15805 Biscayne Blvd, Ste 305 North Miami Beach, FL 33160
SECRETANIASSEE FU
——————————————————————————————————————
filing: (OPTIONAL)  fic and cannot be more than five business days prior to or 90 days after  et the applicable statutory filing requirements, this date will not be listed as  State's records.
ber or an authorized representative of a member. in accordance with section 605.0203 (1) (b), Florida Statutes.

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)