Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : CORPORATION SERVICE COMPANY

Account Number : I2000000195 Phone : (850)521-0821 Fax Number : (850)558-1515

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

Email Address:_____

FLORIDA LIMITED LIABILITY CO. 555 HERITAGE TEI INVESTORS LLC

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

Electronic Filing Menu Corporate Filing Menu Help

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COVER LETTER

TO:

New Filing Section Division of Corporations

555 Heritage TEI Investors LLC

SUBJECT:

Name of Limited Liability Compa

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

David R. Feinberg, Esq.		
	Name of Person	
e/o Time Equities, Inc.		
	Firm/Company	
55 Fifth Avenue, 15th Floor		
	Address	
New York, NY 10003		
· · · · · · · · · · · · · · · ·	City/State and Zip Code	
feinberg@timeequities.com		
E mail address: (to	be used for future annual report notification)	

E-mail address: (to be used for future annual repo

For further information concerning this matter, please call:

David R. Feinberg, Esq. Area Code Name of Person

Enclosed is a check for the following amount:

□S125.00 Filing Fcc

□S130.00 Filing Fee & Certificate of Status

□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)

□\$160.00 Fiting Fcc, 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

Fax Server

				F F . : 2020 DEC -9 PM 4: 19
AKHCLESO	OF ORGANIZATION FOI	R FLORIDA LIMITED	LIABILTLY COMPANY	2020 DEC -9 PM 4: 10
ARTICLE I - Name: The name of the Limited Liabi	lity Company is:			
555 Heritage TELL	nvestors LLC natin the words "Limited	11 iahility Company	"L.L.C." or "LLC.")	
ARTICLE II - Address: The mailing address and street Princi	address of the principal	office of the Limited	Liability Company is: <u>Mailing Address:</u>	
c/o Time Equities, 55 Fifth Avenue, 1 New York, NY 100	5th Floor			
ARTICLE III - Registered A The Limited Liability Compar another business entity with ar	ny cannot serve as its ow	n Registered Agent. 🗅	it's Signature: You must designate an individ	lual or
The name and the Florida stree	anddress of the register	ed agent are:		
	Corporation Service	Name	<u>.</u>	
	1201 Hays Street Florida street addre	ess (P.O. Box <u>NOT</u> ac	cceptable)	
	Taliabassee	FL	32301	
	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..

Corporation Service Company

By The Company

Company

By The C

Elizabeth Kitchen, Assistant Secretary

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title: "AMBR" = Authorized Membe "MGR" = Manager	Name and Address:
MGR	Francis Greenburger, c/o Time Equities, Inc. 55 Fifth Avenue, 15th Floor New York, NY 10003
MGR	Robert Kantor, c/o Time Equities, Inc. 55 Fifth Avenue, 15th Flgor New York, NY 10003
(Use attachment if necessary)	
an effective date is listed, the date mu	is the date of filing:
an effective date is listed, the date must date of filing.) ote: If the date inserted in this block do document's effective date on the Department's Council of the Department's Council of the Department of the	ast be specific and cannot be more than five business days prior to or 90 days after oes not meet the applicable statutory filing requirements, this date will not be listed as partment of State's records.
an effective date is listed, the date must date of filing.) ote: If the date inserted in this block document's effective date on the Department of the Depar	ast be specific and cannot be more than five business days prior to or 90 days after oes not meet the applicable statutory filing requirements, this date will not be listed as partment of State's records.
an effective date is listed, the date must date of filing.) ate: If the date inserted in this block die document's effective date on the Departicle VI: Other provisions, if any. REQUIRED SIGNATURE: Signature This document i am aware that	ast be specific and cannot be more than five business days prior to or 90 days after oes not meet the applicable statutory filing requirements, this date will not be listed as partment of State's records.

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 (Co. 1)

\$ 5.00 Certificate of Status (Optional)