Division of Corporations

2020-12-15 19:22:15 GMT

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From: Vcorp Services, LLC Page 1 of 2



Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : VCORP SERVICES, LLC

Account Number : 120080000067 Phone : (945) 425-0077 Fax Number : (845)819-3588

**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.

Clifford Floyd Capital, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

J. FASON

DEC 16 2020

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Help

ARTIGLESOF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

4 837	FF (~)	4.1	
AK	1 1 C . L	. F. I	l - Name:

The name of the Limited Liability Company is:

Clifford Floyd Capital, LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:	Mailing Address:
90 Alton Road, #TH-12	90 Alton Road, #TH-12
Miami Beach, FL 33139	Miami Beach, FL 33139

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(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:

Veorp Services, LL	Name	
5011 South State Ro	oad 7, Suite 106	,
Florida street addres	ss (P.O. Box NOT ac	ceptable)
n 1	FL	33314
Davie	J 15	

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, Thereby 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..

جورة (Registered Agent's Signature (REQUIRED)

(CONTINUED)

2020 DEC 15 AMII: 13

'AMBR" = Authorized Member	Name and Address:
MGR" = Manager	Jared Kleinman
MGR	21 West 9th Street, Apt 1F1R
	New York, NY 10011
	TOW TOTAL TO TOO
MGR	Jason Fialkov
	90 Alton Road, #1'H-12
	Miami Beach, FL 33139
. ACID	William Gendron
MGR	3131 NE 7th Avenue, Unit 4703
	Minni, FL 33137
	Midmi, FL 33137
MGR	Michael Librett
	I Pelham Avenue
	Sands Point, NY 11050
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nent's effective date on the Departmen VI: Other provisions, if any.	
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