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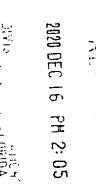
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Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE: 539199 AUTHORIZATION : COST LIMIT : ORDER DATE: December 4, 2020 ORDER TIME : 11:42 AM ORDER NO. : 539199-005 CUSTOMER NO: 7940856 DOMESTIC FILING NAME: 11503 GREEN BAYBERRY 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

EXAMINER'S INITIALS:

CONTACT PERSON: Amanda Robinson - EXT.

CORPORATION SERVICE COMPANY

1201 Hays Street

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

11503 Green Bayl	berry LLC_				
(Must co	onatin the words "Limited	Liability Company.	"L.L.C.," or "LLC.")		_
ARTICLE II - Address: The mailing address and stree	t address of the principal	office of the Limited	Liability Company is:		
<u>Princ</u>	cipal Office Address:		Mailing Addre	ess:	
c/o Lucca Realty			Lucca Realiy		_
620 S. White Horse Road			S. White Horse Road		_
Hammonton, NJ 08037		Ham	monton NJ 08037		_
					:23
The name and the Florida stre	et address of the registere Corporation Service	: Company			20 DEC
The name and the Florida stre	Corporation Service	_			2020 DEC 16 ,
The name and the Florida stre	Corporation Service	: Company	cceptable)		
The name and the Florida stre	Corporation Service	: Company Name	cceptable)	- -	
The name and the Florida stre	Corporation Service 1201 Hays Street Florida street addre	Name See Company Name See (P.O. Box NOT ac	•	- 	120 DEC 16 AH 10: 14

(CONTINUED)

ARTICLE IV-

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

"MGR" = Manager	de Lucies Destru
Lynne Lucca - MGR	c/o Lucca Realty 620 S. White Horse Road
	Hammonton, NJ 08037
(Use attachment if necessary)	
effective date is listed, the date must be s e of filing.)	te of filing:
CLE VI: Other provisions, if any.	
· · · · · · · · · · · · · · · · · · ·	

Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Corporation Service Company, Organizer, Elizabeth A. Smith, Asst Sec 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)