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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	
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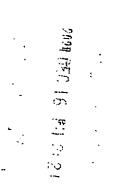
Office Use Only

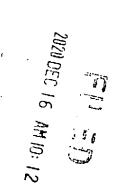


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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

FFPB, LLC		
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		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
	İ	Merger File
		Art, of Amend, File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
		Officer Search
	Ì	Fictitious Search
Signature		Fictitious Owner Search
•		Vehicle Search
		Driving Record
Requested by: SETH		UCC 1 or 3 File
Name Date	Time	UCC 11 Search
		UCC 11 Retrieval
Walk-In Will Pick Up		Courier

COVER LETTER

TO:	New Filing Section Division of Corporations			
enn me	FFPB, LLC			
SUBJEC		f Limited Liabil	ty Company	
The enck	osed Articles of Organization and fee(s) are submitted	for filing.	
Please re	turn all correspondence concerning th	is matter to the f	ollowing:	
	PAUL A. KRASKER, ESQ			
		Name of	Person	· · · · · · · · · · · · · · · · · · ·
	THE LAW OFFICE OF PAUL A.	KRASKER, P.,	١.	
,	· · · · · · · · · · · · · · · · · · ·	Firm/Co	nipany	
	1615 FORUM PLACE, 5TH FLO	OR		
		Addre	ess	***
	WEST PALM BEACH, FLORIDA	A 33401		
	PKRASKER@KRASKERLAW.CO	City/State and	I Zip Code	
	E-mail address: (to be		nnual report notificati	on)
For further	information concerning this matter, p	lease call;		
	ANDREA MURPHY SNOWDER	561	515-4722	
	Name of Person		Daytime Telephon	
Enclosed	is a check for the following amount:			
	00 Filing Fee \$130.00 Filing Fe Certificate of Status	s Certific	6.00 Filing Fee & ed Copy ed Copy el copy is enclosed)	☐\$160.00 Filing Fee, 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 Di The Centre of Tallaha 2415 N. Monroe Stree Fallahassee, FL 3230	issee et, Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

FFPB, LLC (Must contain the words "Limited Liabil	ity Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address of the principal office of	of the Limited Liability Company is:	
Principal Office Address:	Mailing Address:	
143 REEF ROAD	143 REEF ROAD	
PALM BEACH, FL 33480	PALM BEACH, FL 33480	
ARTICLE III - Registered Agent, Registered Office, & Registered Liability Company cannot serve as its own Regis	gistered Agent's Signature:	
(The Limited Liability Company cannot serve as its own Regis another business entity with an active Florida registration.) The name and the Florida street address of the registered agen	stered Agent. You must designate an individual or	2020 DEC
(The Limited Liability Company cannot serve as its own Regis another business entity with an active Florida registration.)	stered Agent. You must designate an individual or	2020 DEC 16
(The Limited Liability Company cannot serve as its own Regis another business entity with an active Florida registration.) The name and the Florida street address of the registered agen THE LAW OFFICE OF P.	stered Agent. You must designate an individual or	. 65
(The Limited Liability Company cannot serve as its own Regist another business entity with an active Florida registration.) The name and the Florida street address of the registered agen THE LAW OFFICE OF P. Nan	stered Agent. You must designate an individual or t are: AUL A. KRASKER, P.A. ne	. 65
(The Limited Liability Company cannot serve as its own Regis another business entity with an active Florida registration.) The name and the Florida street address of the registered agen THE LAW OFFICE OF P. Nan 1615 FORUM PLACE, ST	stered Agent. You must designate an individual or t are: AUL A. KRASKER, P.A. ne	. 6

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager <u>M</u>GR FRANCES FRISBIE 143 REEF ROAD PALM BEACH, FL 33480 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: ____ ____. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. REQUIRED SIGNATUREZ 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.\$17.155, F.S. FRANCES FRISBIE

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)