

L20000390474

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
2020 DEC 17 PM 2:08
DEPT. OF REVENUE
TALLAHASSEE, FLORIDA

FILED
2020 DEC 17 PM 12:32
SECRETARY OF STATE
TALLAHASSEE, FL

CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 575616 4345405

AUTHORIZATION :



COST LIMIT : \$ 130.00

ORDER DATE : December 16, 2020

ORDER TIME : 10:10 AM

ORDER NO. : 575616-005

CUSTOMER NO: 4345405

DOMESTIC FILING

NAME: VAN HIGHLAND 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
XX _____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Eyliena Baker - EXT.

EXAMINER'S INITIALS: _____

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: VAN HIGHLAND LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

JOSEPH S. ABOYOUN, ESQ.

Name of Person

ABOYOUN DOBBS LLC

Firm/Company

77 Bloomfield Avenue (Route 46 West)

Address

Pine Brook, New Jersey 07058

City/State and Zip Code

jaboyoun@aboyoundobbs.com

E-mail address; (to be used for future annual report notification)

For further information concerning this matter, please call:

Joseph S. Aboyoun, Esq.

973

575-9600

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$125.00 Filing Fee

☒ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional 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 Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2020 DEC 17 PM 12:32

ARTICLE I - Name:

The name of the Limited Liability Company is:

SECRETARY OF STATE
TALLAHASSEE, FL

VAN HIGHLAND 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:

4216 South Ocean Boulevard
Highland Beach, Florida 33487

Mailing Address:

4216 South Ocean Boulevard
Highland Beach, Florida 33487

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:

Corporation Service Company

Name

1201 Hays Street

Florida street address (P.O. Box **NOT** acceptable)

| | | |
|--------------------|-----------|--------------|
| <u>Tallahassee</u> | <u>FL</u> | <u>32301</u> |
| 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 *Shirley P. Holman*

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

| | |
|--------------------------------------|--|
| MGR | Raymond Van Duren 4216 South Ocean Boulevard Highland Beach, Florida 33487 |
| MGR | Todd Van Duren 4216 South Ocean Boulevard Highland Beach, Florida 33487 |
| MGR | Drew Van Duren 4216 South Ocean Boulevard Highland Beach, Florida 33487 |
| MGR | Faith Van Duren 4216 South Ocean Boulevard Highland Beach, Florida 33487 |
| MGR (Use attachment if necessary) | Beth Picciano 4216 South Ocean Boulevard Highland Beach, Florida 33487 |

SECRET
TALLAHASSEE, FL

2020 DEC 17 PM 12:32

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 SIGNATURE:

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.

Todd Van Duren
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)