

L 210000155813
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To:

Division of Corporations
Fax Number : (850) 617-6381

From:

Account Name : JOHNSON, POPE, BOKOR, RUPPEL & BURNS, LLP.
Account Number : 076666002140
Phone : (727) 461-1818
Fax Number : (727) 441-8617

****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.
LC-HC JV LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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**ARTICLES OF ORGANIZATION OF
LC-HC JV LLC**

The undersigned, acting as the authorized representative of the member of LC-HC JV LLC (the "Company"), does hereby certify that said member has formed the Company to be a limited liability company under the laws of the State of Florida and under the Florida Revised Limited Liability Company Act, Chapter 605, Florida Statutes, as amended (the "Act"), and, pursuant to the Act, hereby sets forth the following Articles of Organization:

ARTICLE I: NAME

The name of the Company shall be LC-HC JV LLC.

ARTICLE II: ADDRESS AND PLACE OF BUSINESS

The initial address of the principal office and the mailing address of the Company shall be 270 Clearwater Largo Rd N, Suite C, Largo, Florida 33770.

ARTICLE III: DURATION AND PURPOSE

The period of duration of the Company shall be perpetual. The Company is formed for the purpose of conducting and undertaking, and shall have the power to conduct and undertake, any and all activities and actions authorized under the Act.

ARTICLE IV: MANAGEMENT

The Company shall be manager-managed and all powers of the Company shall be exercised by or under the authority of the manager except as otherwise provided in the operating agreement of the Company. The initial manager shall be Loci Capital Management Co., LLC.

ARTICLE V: REGISTERED OFFICE AND REGISTERED AGENT

The street address of the Company's initial registered office in Florida is 490 1st Ave S, Suite 700, St. Petersburg, Florida 33701, and the name of its initial registered agent is Chestnut Business Services, LLC. The Company may change its registered office or its registered agent or both by filing with the Department of State of the State of Florida a statement complying with Section 605.0113 of the Act.

[Signature Page Follows]

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**ARTICLES OF ORGANIZATION OF
LC-HC JV LLC**

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IN WITNESS WHEREOF, the undersigned manager is an authorized representative and has executed these Articles of Organization effective for all purposes as of the 12 day of January, 2021.

Loci Capital Management Co., LLC,
a Florida limited liability company

By: Loci Capital Group, LLC,
a Florida limited liability company




Michael Phillips, Manager

ACCEPTANCE BY REGISTERED AGENT

Having been appointed the registered agent of LC-HC JV LLC, the undersigned accepts such an appointment, agrees to act in such capacity and accepts the obligations imposed by Section 605.0113 of the Act.

EXECUTED this January 12, 2021.

CHESTNUT BUSINESS SERVICES, LLC,
a Florida limited liability company

By: 
Name: William C. Conroy
Title: Vice President

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Florida Department of State
Division of Corporations
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Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : EXPERTAX
Account Number : I20200000010
Phone : (407)777-7470
Fax Number : (321)206-9743

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**FLORIDA LIMITED LIABILITY CO.
P & G GLOBAL SERVICE LLC**

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

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Corporate Filing Menu

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H210000155333

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: P & G GLOBAL SERVICE 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:

ARIAS GOMEZ, GABRIEL A

Name of Person

Firm/Company

20040 W DIXIE HWY APT 14201

Address

MIAMI, FL 33180

City/State and Zip Code

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

For further information concerning this matter, please call:

ARIAS GOMEZ, GABRIEL at () 786 8040155
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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

P & G GLOBAL SERVICE 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:

20040 W DIXIE HWY APT 14201
MIAMI, FL 33180

13837 PALOMINO CREEK DR
CORONA, CA 92883

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:

ARIAS GOMEZ, GABRIEL A

Name

20040 W DIXIE HWY APT 14201

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

MIAMI

FL


33180

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..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

MEMBER

Name and Address:

ARIAS GOMEZ, GABRIEL
20040 W DIXIE HWY APT 14201
MIAMI, FL 33180

MEMBER

ARIAS, PAOLA
20040 W DIXIE HWY APT 14201
MIAMI, FL 33180

(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 SIGNATURE:

AG
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.

ARIAS GOMEZ, GABRIEL A

Typed or printed name of signer

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)

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