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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

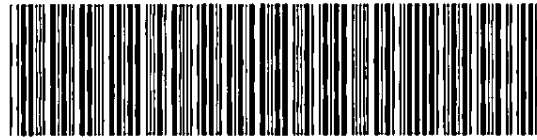
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

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1-14-21

## CAPITAL CONNECTION, INC.

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

ARIVA FL XV LLC

Signature \_\_\_\_\_

Requested by: \_\_\_\_\_

Name \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Walk-In \_\_\_\_\_ Will Pick Up \_\_\_\_\_

\_\_\_\_ Art of Inc. File \_\_\_\_\_  
\_\_\_\_ LTD Partnership File \_\_\_\_\_  
\_\_\_\_ Foreign Corp. File \_\_\_\_\_  
\_\_\_\_ L.C. File \_\_\_\_\_  
\_\_\_\_ Fictitious Name File \_\_\_\_\_  
\_\_\_\_ Trade/Service Mark \_\_\_\_\_  
\_\_\_\_ 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 \_\_\_\_\_  
\_\_\_\_ Fictitious Search \_\_\_\_\_  
\_\_\_\_ Fictitious Owner Search \_\_\_\_\_  
\_\_\_\_ Vehicle Search \_\_\_\_\_  
\_\_\_\_ Driving Record \_\_\_\_\_  
\_\_\_\_ UCC 1 or 3 File \_\_\_\_\_  
\_\_\_\_ UCC 11 Search \_\_\_\_\_  
\_\_\_\_ UCC 11 Retrieval \_\_\_\_\_  
\_\_\_\_ Courier \_\_\_\_\_

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**ARTICLES OF ORGANIZATION  
OF  
ARIVA FL XV LLC  
A FLORIDA LIMITED LIABILITY COMPANY**

The undersigned, for purposes of forming a limited liability company pursuant to Florida Statutes Section 605, hereby adopts the following Articles of Organization:

**ARTICLE I  
COMPANY NAME**

The name of the limited liability company is ARIVA FL XV LLC (the "Company").

**ARTICLE II  
INITIAL ADDRESS**

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

9114 McPherson Rd.  
Suite 2521  
Laredo, TX 78045

**ARTICLE III  
REGISTERED AGENT**

The registered agent and the Florida street address of the registered agent is:

Scott A. Marcus, Esq.  
c/o Becker & Poliakoff, P.A.  
1 East Broward Boulevard, Suite 1800  
Fort Lauderdale, Florida 33301

**ARTICLE IV  
MANAGEMENT**

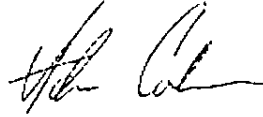
The Company is to be managed by one (1) or more managers and is, therefore, a manager managed company.

The name and street address of the initial manager of the Company is:

ARIVA FL Management LLC  
9114 McPherson Rd.  
Suite 2521  
Laredo, TX 78045

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IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 11<sup>th</sup> day of January, 2021.



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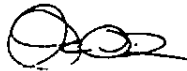
Adam M. Cohen, Esq., authorized representative

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ACCEPTANCE OF APPOINTMENT  
OF  
REGISTERED AGENT

The undersigned hereby accepts the appointment as registered agent of ARIVA FL XV LLC contained in the foregoing Articles of Organization and states that the undersigned is familiar with and accepts the obligations imposed upon registered agents pursuant to the Florida Revised Limited Liability Company Act.

Date: January 11, 2021



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Scott A. Marcus, Esq., an individual

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