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NAME: PEAH STRATEGIES, LLC

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#### COVER LETTER

то:	New Filing Se Division of Co							
SUBJE	Peah Strategies, LLC							
SOBJE	C1	Name of Limited Liability Company						
The enc	losed Articles of	Organization and fe	e(s) are submit	ted for filing.				
Please re	eturn all corresp	ondence concerning	this matter to tl	ne following:				
	Salomon V.	Bagdadi, Esq.						
			Name	of Person				
	Salomon V.	Bagdadi, P.A.						
	Firm/Company							
	15807 Biscayne Blvd, Suite 115							
	Address							
	North Miam	i Beach, FL 33160						
			City/State	and Zip Code				
	salo@svblaw			e annual report notificat	ion)			
				e amigai report normeat	ion)			
or furthe	er information co	neerning this matter.	, please call:					
			305 _at (	788-3664				
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Enclosed	d is a check for t	he following amount	:					
■\$125.00 Filing Fee   □\$130.00 Filing Fee & Certificate of Status		Fee & □\$ tus Cert	155.00 Filing Fee & ified Copy onal 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 D The Centre of Tallaha 2415 N. Monroe Stre Tallahassee, FL 3230	assee et, Suite 810			

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Peah Strategies, LL	C			
(Must con	tain the words "Limited Lia	bility Company,	"L.L.C.," or "LLC.")	
RTICLE II - Address: he mailing address and street a	address of the principal offic	ce of the Limited	Liability Company is:	
<u>Princi</u>	oal Office Address:		Mailing Address:	;
2650 NW 5th AVE		2650	) NW 5th AVE	
Miami, FL 33127		Mia	mi, FL 33127	
RTICLE III - Registered Ag he Limited Liability Compan- nother business entity with an	y cannot serve as its own Re	Registered Agei	nt's Signature:	dual or
he Limited Liability Company	y cannot serve as its own Reactive Florida registration.)	Registered Agei	nt's Signature:	
he Limited Liability Companiother business entity with an	y cannot serve as its own Reactive Florida registration.)	Registered Agent.	nt's Signature:	
he Limited Liability Companiother business entity with an	y cannot serve as its own Reactive Florida registration.) address of the registered ag Salomon V. Bagdadi, P	Registered Agent.	nt's Signature:	( n n n n n n n n n n n n n n n n n n n
he Limited Liability Companiother business entity with an	y cannot serve as its own Reactive Florida registration.) address of the registered ag Salomon V. Bagdadi, P	Registered Agent. gent are: .A.	nt's Signature:	ro c
he Limited Liability Companiother business entity with an	y cannot serve as its own Reactive Florida registration.) address of the registered ag Salomon V. Bagdadi, P	Registered Agent. gent are: .A. lame	nt's Signature: You must designate an indivi	) is a find for the
he Limited Liability Companiother business entity with an	y cannot serve as its own Reactive Florida registration.) address of the registered ag  Salomon V. Bagdadi, P  N  15807 Biscayne Blvd, S	Registered Agent. gent are: .A. lame	nt's Signature: You must designate an indivi	r

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:

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:					
"MGR" = Manager						
MGR	Peah Capital, LLC 2650 NW 5th AVE					
	Miami, FL 33127					
	<del></del>					
<del></del>						
(If an effective date is listed, the date must the date of filing.)	e date of filing:					
ARTICLE VI: Other provisions, if any.						
REQUIRED SIGNATURE:	-71					
This document is e	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.					
Dan Arev						
rom they	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)