# L210000056095

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2021 FEB 11 AH IO: 50

### Sunshine State Corporate Compliance Company

## 3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 02/11/2021		**WA	LK IN**
ENTITY NAME MANGO	STREET, LLC		····
DOCUMENT NUMBER			
	**PLEASE FILE THE ATTACHED AND RETURN**		
×××××	Plain Copy Certified Copy Certificate of Status	*1.78	TK #K *
**PL	EASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**  Certified Copy of Arts & Amendments		
	Certificate of Good Standing	······································	ese V
	**APOSTILLE' / NOTARIAL CERTIFICATION**		
COUNTRY OF DESTINATION NUMBER OF CERTIFICATE	ONES REQUESTED	<del></del>	
TOTAL OWED \$125.00	ACCOUNT #: I20160000072		
Please call Tina at the	above number for any issues or concerns. Thank you so n	nuch!	

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		o Street, LLC				
(M	ust 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 Addre	<u>ess</u> :		
28280 Old 41	Rd M-17					
Bonita Spring	is, FL 34135				_ <del>_</del>	
<del></del>			<u>.</u>		<del></del>	
	red Agent, Registered Office					
(The Limited Liability C	ompany cannot serve as its ow	n Registered Agent. \		ividual or		
(The Limited Liability C another business entity)	ompany cannot serve as its ow with an active Florida registrati	n Registered Agent. \ on.)		ividual or	2021	
(The Limited Liability C another business entity)	ompany cannot serve as its ow	n Registered Agent. \ on.)		ividual or	2021 FE 	~;;
(The Limited Liability C another business entity)	ompany cannot serve as its ow with an active Florida registrati	n Registered Agent. \ on.)		ividual or	2021 FEB <sub>1</sub>	Ţ,
(The Limited Liability C another business entity)	ompany cannot serve as its ow with an active Florida registration as street address of the registered	n Registered Agent. \ on.)		ividual or	2021 FEB	- j - <u> </u>
(The Limited Liability C another business entity)	ompany cannot serve as its ow with an active Florida registration as street address of the registered	n Registered Agent. \ fon.)  ed agent are:  Name		ividual or		
(The Limited Liability C another business entity)	ompany cannot serve as its ow with an active Florida registration a street address of the registere Trevor Johnson  2202 Imperial Golf	n Registered Agent. \ fon.)  ed agent are:  Name	You must designate an ind	ividual or		
(The Limited Liability C another business entity)	ompany cannot serve as its ow with an active Florida registration a street address of the registere Trevor Johnson  2202 Imperial Golf	n Registered Agent. Von.)  ed agent are:  Name  Course Blvd	You must designate an ind	ividual or		
(The Limited Liability C another business entity)	ompany cannot serve as its ow with an active Florida registration astreet address of the registered.  Trevor Johnson  2202 Imperial Golf Florida street address	n Registered Agent. Von.) ed agent are: Name Course Blvd ss (P.O. Box NOT ac	You must designate an ind	ividual or	2021 FEB 1 1 AM 10: 50	
(The Limited Liability C another business entity value name and the Florid	ompany cannot serve as its ow with an active Florida registration a street address of the registered.  Trevor Johnson  2202 Imperial Golf Florida street addres.  Naples	n Registered Agent. Von.)  ed agent are:  Name  Course Blvd ss (P.O. Box NOT ac  FL  State	You must designate an ind eceptable)  34110  Zip		AM 10: 50	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

#### ARTICLE IV-

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

<u>litle:</u>		Name and Address:
	Authorized Member	
MGR" = Ma	mager	
AMBR	<del></del>	Trevor Johnson
		2202 Imperial Golf Course Blvd Naples, FL 34110
		Naples, FL 34110
AMDD		Steve Boge
AMBR	<del></del>	335 Soll Street
		Naples, FL 34109
AMBR	<del></del>	Robert Alan Neitzke Rey Trust Dated 9/21/2012
		PO Box 247
		Sauk Rapids, MN 56379
Use attachm	ent if necessary)	
	• •	
ent's effecti	rted in this block does no ve date on the Departmo rrovisions, if any.	ot meet the applicable statutory filing requirements, this date will not be ent of State's records.
	To visionia, ii arry.	
REOUIRED	SIGNATURE:	Omultipred by
		TATE WAY HARMAN AND
	Signatura of	TYETOT Joffnson
		member or an authorized representative of a member.
	This document is exe	ecuted in accordance with section 605.0203 (1) (b), Florida Statutes.
	This document is exell am aware that any fa	
	This document is exell am aware that any faconstitutes a third deg	ecuted in accordance with section 605.0203 (1) (b). Florida Statutes, also information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.
	This document is exell am aware that any fa	ecuted in accordance with section 605.0203 (1) (b). Florida Statutes, also information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.
	This document is exell am aware that any faconstitutes a third deg	recuted in accordance with section 605.0203 (1) (b). Florida Statutes, alse information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.  Typed or printed name of signee
\$125.00 Fil	This document is exell am aware that any faconstitutes a third deg	recuted in accordance with section 605.0203 (1) (b), Florida Statutes, alse information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.  Typed or printed name of signee  Filing Fees:
	This document is exe I am aware that any fa constitutes a third deg  Trevor Johnso  ing Fee for Articles of	recuted in accordance with section 605.0203 (1) (b). Florida Statutes, alse information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.  Typed or printed name of signee  Filing Fees: Organization and Designation of Registered Agent
\$ 30.00 Ce	This document is exell am aware that any faconstitutes a third deg	recuted in accordance with section 605.0203 (1) (b). Florida Statutes, also information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.  Typed or printed name of signee  Filing Fees: Organization and Designation of Registered Agent )

- \$ 5.00 Certificate of Status (Optional)