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Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	
	Office Use Only	



03/01/21--01002--003 **125.00





Business Name & Document Number, (if known):

1. <u>IPA VENTURES LLC</u> Name	Document Number (if known)
x Walk in	Will wait
Certified Copy	
Certificate of Status	
NEW FILINGS	AMENDMENTS
Profit	Amendment
Not for Profit	Resignation of R.A. Officer/Director
X Limited Liability	Change of Registered Agent
Domestication	Dissolution/Withdrawal
INC	Conversion
OTHER - Corp	Merger

OTHER FILINGS

____Annual Report

Fictitious Name

____ Statement of Authority

___APOSTIL ()____ COUNTRY

REGISTRATION/OUALIFICATIONS

Foreign Filing
 Limited Partnership
Reinstatement

Traden	nark
Other	

EXAMINER'S INITIALS:

COVER LETTER

TO:	New Filing Section
	Division of Corporations

IPA VENTURES LLC

SUBJECT:

• . .

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:

Leila Ros	
	Name of Person
AEGIS LAW	
	Firm/Company
100 S Ashley Dr Ste 620	
	Address
Tampa FL 33602	· · ·
	City/State and Zip Code
lros@acgislaw.com	
E-mail address	: (to be used for future annual report notification)
For further information concerning this	natter, please call:
Leila Ros	813 999-0199 at ()
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following a	mount:
■\$125.00 Filing Fee □\$130.00 Certificate	Filing Fee &Image: \$155.00 Filing Fee &Image: \$160.00 Filing Fee &of StatusCertified CopyCertificate of Status &(additional copy is enclosed)Certified Copy(additional copy is enclosed)Certified Copy(additional copy is enclosed)Certified Copy
<u>Mailing Address</u> New Filing Section Division of Corpora P.O. Box 6327 Tallahassee, FL 323	2415 N. Monroe Street, Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

IPA VENTURES 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:
510 Jeanal Place	510 Jeanal Place
Tampa, FL 33612	Tampa, FL 33612

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:

AEGIS LAW			21	
	Name		FEB	
100 S Ashley Dr Ste	620		26	
Florida street address (P.O. Box NOT acceptable)		AH	- 6	
Tampa	FL	33602		
City	State	Zip	0	

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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..

AEGIS LAW

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	Name and Address:
"MGR" = Manager	
MGR	Wesley Spencer 510 Jeanal Place Tampa, FL 33612
MGR	Aharon Chemin 510 Jeanal Place Tampa, FL 33612
<u>MGR</u>	Dave Gilden 510 Jeanal Place Tampa, FL 33612
MGR	Mark Tusszvnki 510 Jeanal Place Tampa, FL 33612

(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.)

<u>Note:</u> 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.

Wesley Spacer (Feb 25, 2021 14:58 EST)

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.

Wesley Spencer

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

S 30.00 Certified Copy (Optional)

S 5.00 Certificate of Status (Optional)

Title:	Name and Address:	
MGR	John Ford	
	510 Jeanal Place	
	Tampa, FL 33612	
MGR	Julio Sanchez	
	510 Jeanal Place	
	Tampa, FL 33612	

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