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TO:

New Filing Section

D	ivision of Cor	porations					
SUBJECT	ArtSea 1880	0 L.L.C.					
JOBJECT	·	Name	of Limited Lia	bility Company			
The enclos	sed Articles of	Organization and fo	ee(s) are submit	ted for filing.			
Please retu	ırn all correspo	ndence concerning	this matter to the	he following:			
	Elias Petrus I	Fernandini					
		· · · · · ·	Name	of Person		_	<u></u>
			F2:	16			
				/Company			
	155 Ocean L	ane Drive, Apt 715					
			Α	ddress			
	Key Biscayn	e, FL, 33149					
	petrusfernandi	ini@gmail.com	City/State	and Zip Code			
	<u> </u>		be used for futu	re annual report notifica	tion)		19 <u>02</u>
For further i	information co	ncerning this matte	r, please call:			WLLVHVS)	9021 FEB
	Elias Petrus F	ernandini	919 at (381-7632		HAS.	23
Enclosed i		e of Person	Area Cod	e Daytime Telepho	ne Number	عظالہ محجا جہ	AM 9: 22
□\$125.00	O Filing Fee	□\$130.00 Filing Certificate of Sta	atus Ce	\$155.00 Filing Fee & rtified Copy is enclosed)	Certific Certific	0.00 Filing cate of Stati ed Copy al copy is e	us &
V	New F Division P.O. B	eg Address iling Section on of Corporations ox 6327 assee, FL 32314		Street Address New Filing Section I The Centre of Tallal 2415 N. Monroe Str Tallahassee, FL 323	nassee eet, Suite 81	0	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ArtSea 1880 L.L.C. (Must contain the words "Limited Li	ability Company, "L.L.C.," or "LLC.")
TICLE II - Address:	
e mailing address and street address of the principal off	ice of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
155 Ocean Lane Drive	155 Ocean Lane Drive
Apt 715	Apt 715
Key Biscayne, FL, 33149	Key Biscayne, FL, 33149

Elias Petrus Fernandini Name

155 Ocean Lane Drive, Apt 715

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

FL 33149 Key Biscayne Zip City State

'laving 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 urther agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I im familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	Elias Petrus Erasmo Fernandini Bohlin
TOTAL TOTAL	155 Ocean Lane Drive, Apt 715
	Key Biscavne, FL, 33149
AMBR	Rodolfo Alberto Beeck Ulloa
AWIDK	200 Ocean Lane Drive. Apt PA2
	Key Biscayne, FL. 33149
-	
(Use attachment if necessary)	
·	
the document's effective date on the Depar ARTICLE VI: Other provisions, if any.	rtment of State's records.
REQUIRED SIGNATURE:	Petr Farando
Signature o	of a member or an authorized representative of a member.
This document is	executed in accordance with section 605.0203 (1) (b), Florida Statutes.
	ny false information submitted in a document to the Department of State
	7. 121
Elias Petru	ıs Erasmo Fernandini Bohlin
	I degree felony as provided for in s.817.155, F.S. as Erasmo Fernandini Bohlin Typed or printed name of signee Filling Fees:
	Typed or printed name of signee Filing Fees: s of Organization and Designation of Registered Agent ponal)
\$ 30.00 Certified Copy (Option)nal)
\$ 5.00 Certificate of Status (of Organization and Designation of Registered Agent on all on all open on all o
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