L21000108996

(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



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SECKETARY OF STATE
SECRETARY OF STATE

W. Slals

CAPITAL CONNECTION, INC.

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

EH FEH Holdings, I	LLC			
	· · · · · · · · · · · · · · · · · · ·			
				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
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				Driving Record
Requested by: SETH	03/16/21			UCC 1 or 3 File
Name	Date	Time		UCC +1 Search
Natife	Date	11110		UCC 1! Retrieval
Walk-In	Will Pick Up			Courier

COVER LETTER

то:	New Filing Second Division of Cor				
SUBJEC	SEH FEH I	Holdings, LLC			
306.120		Name of	Limited Liabil	ity Company	
The enc	losed Articles of	Organization and fee(s	s) are submitted	for filing.	
Picase re	etum all correspo	indence concerning thi	s matter to the	following:	
	Kareen Thon	ulwon			,
•			Name of	Person	
			Firm/Co	трапу	· · · · · · · · · · · · · · · · · · ·
	3725 \$ Ocean	n Drive 304			•
	·		Add	'¢5 5	
	Hollywood, F	FL 3019			
	karaenikaane		City/State ar	id Zip Code	'
		on97@gmuil.com -mail address: (to be	used for future	nnual report notificati	ion)
For furthe		ncerning this matter, p			• . •
	Kayeen Thom		646	4687950	
	Nam	e of Person	Area Code	Daytime Telephon	e Number
Enclose	d is a check for t	he following amount:			·
	.00 Filing Fee	■\$130.00 Filing For Certificate of Statu	s Certif	is.00 filling Fee & led Copy ial copy is enclosed)	S160.00 Filing Fee, Cortificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisio P.O. B	ng Address Hing Section on of Corporations tox 6327 assee, FL 32314		Street Address New Filing Section D The Centre of Tallah 2415 N. Monrae Stre Tallahassee, FL 3230	assec et, Suite 810





March 15, 2021

CAPITAL CONNECTION

SUBJECT: SEH FEH HOLDINGS, LLC

Ref. Number: W21000034342

We have received your document for SEH FEH HOLDINGS, LLC and your check(s) totaling \$130.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The designation of the registered agent must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Letter Number: 721A00005411

Neysa Culligan Regulatory Specialist III

www.sunbiz.org

Division of Compactions D.O. DOY (2007 Tellaborate Florida 2001)

FILED

2021 FAR 16 AM 8: 30

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

SECRETARY OF STATE TALLAHASSEE, FL

ARTICLE I - Name: The name of the Limited Liability Company is:

SEH FEH Ho	·	ishilim/Conseque	M. C.C. Paciff C.D.
(MI	ist contain the words "Limited L	ikumiy Company,	Tatalan of CEC.)
TICLE II - Address:			
	street address of the principal of	fice of the Limited	Liability Company is:
i	rincipal Office Address:		Mailing Address:
3725 S Occom	Drive 304	372	5 \$ Ocean Drive 304
Hallywood, F			ywood, FL, 33019
	red Agent, Registered Office, &		
ie Limited Liability Co		Registered Agent.	nt's Signature: You must designate an individual or
ne Limited Liability Control business entity of	suspany cannot serve as its own	Registered Agent. 3.)	
he Limited Liability Continues cutity of	ompany cannot serve us its own vith an active Plorids registration	Registered Agent. 3.)	
he Limited Liability Continues cutity of	ninpany cannot serve us its own vith an active Plotida registration a street address of the registered	Registered Agent. 3.)	
he Limited Liability Continues cutity of	ninpany cannot serve us its own vith an active Plotida registration a street address of the registered	Registered Agent. 1.) agent are: Name	
he Limited Liability Co other business entity s	ninpany cannot serve us its own with an active Plotida registration a street addices of the registered Kareen Thompson	Registered Agent. 1.) agent are: Name	You must designate an individual or
he Limited Liability Control business entity of	ninpany cannot serve us its own with an active Plotida registration a street addices of the registered Kareen Thompson 3725 \$ Ocean Drive 3	Registered Agent. 1.) agent are: Name	You must designate an individual or

Having been named at 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 copacity. 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)

	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager		
Мопадет	Kareen Thompson	
	1725 S Ocean Drive 104	
	Hallywood, FL 33019	
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Filius 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)