

L21000 123766

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

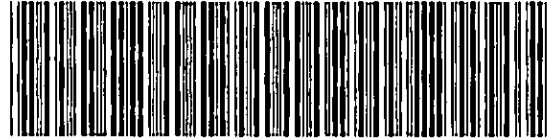
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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03/05/21--01025--018 **910.00

2021 MAR -5 PM 2:02
CLERK OF SUPERIOR COURT
JULIA H. HARRIS

LAW OFFICE OF
B.J. REEVES, P.A.

1779 N. University Drive
Suite 202
Pembroke Pines, FL 33024
bj@tctitleinsurance.com

Phone: 954.963.4740
Fax: 954.985.7339
Boca Raton

March 4, 2021

Florida Secretary of State
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street
Suite 810
Tallahassee, Florida 32303

Dear Sir or Madam:

Enclosed please find seven (7) new Limited Liability Company filings and my check in the amount of \$910.00 for the filing fees and Certificates of Status for each company.

Should you need further information, please be sure to contact me.

Respectfully,



B.J. Reeves

Enc.
Via Fedex

BJR/tsr

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

4361 SW 49th Ct 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:

4361 SW 49th Court 4811 Hayes Street
Fort Lauderdale, Florida 33314 Hollywood, Florida 33021

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:

ELIYAHU NURIELI

Name

4811 Hayes Street

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

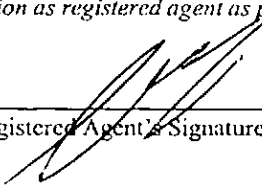
Hollywood, Florida 33021

City

State

Zip

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)

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

AMBR

ELIYAHU NURIELI
4811 Hayes Street
Hollywood, Florida 33021

AMBR

KFIR NURIELI
4811 Hayes Street
Hollywood, Florida 33021

(Use attachment if necessary)

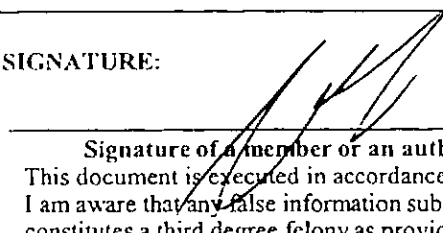
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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.)

Note: 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.

REQUIRED SIGNATURE:



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.

ELIYAHU NURIELI

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)

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