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Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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то:	Division of Corporations Fax Number : (850)617-6381	Arrijase	RIZ AM	
From:	Account Name : LAZARUS CORPORATE FILING SERVICE, INC. Account Number : I20000000019 Phone : (305)552-5973 Fax Number : (305)675-5944		6: 57	* <u>*</u>

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email A	Address:	
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FLORIDA LIMITED LIABILITY CO. BELLO MONTE FIRM LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
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ARTICLES OF ORGANIZATION **FOR** FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is: (Must end with the words Limited Liability Company, "L.L.C.," or "LLC.")

BELLO MONTE FIRM LLC

The mailing address and street address of the principal office of the Limited Liability Company is:

340 SE 3RD ST

APT 3710

MIAMI, FL 33131

ARTICLE III - Registered Agent, Registered Office:

The name and the Florida street address of the registered agent are: (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.)

FELIX O RANGEL

340 SE 3RD ST APT 3710

MIAMI, FL:33131

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

FELIX O RANGEL- MGR

340 SE 3RD ST APT 3710

MIAMI, FL 33131

Required Signatures:

04/13/2021 15:38

Signature of a member or an authorized representative of a member.

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.

FELIX O RANGEL

Typed or printed name of signee

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)

2021 APR 12 AM 6: 57

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the limited liability company is:

WESTSIDE PHASE II, LLC

ARTICLE II - Address

The mailing address and the street address of the principal office of the limited liability company are:

1100 NW 4th Avenue Delray Beach, FL 33444

ARTICLE III - Management

The limited liability company shall be managed by one or more managers (who shall be designated "Manager(s)") and is, therefore, a manager-managed company within the meaning of Section 605.0407, Florida Statutes. The rights, duties and obligations of the Manager(s) and the Member(s) of the limited liability company shall be as set forth in writing in the agreement(s) of the Member(s).

The name and street address of the initial Manager of the limited liability company are:

WESTSIDE PHASE II FORTIS, LLC 1100 NW 4th Avenue Delray Beach, FL 33444

ARTICLE IV - Registered Agent and Office

The name and street address of the initial registered agent of the limited liability company are:

CORPORATION COMPANY OF MIAMI 200 S. Biscayne Blvd Suite 4100 (GJC) Miami, Florida 33131