Division of Corporations Electronic Filing Cover Sheet

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.

(((H210001562943)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : I20000000146 : (305)444-4994 Fax Number : (305)444-4977

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

Ema	i 1	Address:	

FLORIDA LIMITED LIABILITY CO. RESTATE INVESTMENT LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing Menu

Help

To: 18506176381 Page: 3 of 4 2021-04-19 20:38:46 GMT 13053284774 dothoop regnature welfloatteet út trimte met eige Mich ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY ARTICLE 1 - Name: The name of the Limited Liability Company is: RESTATE INVESTMENT 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: Mailing Address: Principal Office Address: 520 Brickell Key Dr. #A1619 520 Brickell Key Dr #A1619 Miami, FL 33131 Miami, FL 33131 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: BARAN BAYKAL Name

520 Brickell Key Dr. #A1619 Florida street address (P.O. Box NOT acceptable) City

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)

176381	Page: 4 of 4	2021-04-19 20:38:46 GMT	13053284774
stloop signatura-vertific	ation drop exeminatelyjpositiv		
	ARTICLE IV-		
	The name and address of each p	person authorized to manage and control th	E Limited Liability Company:
	Title:	Name and Address:	
	"AMBR" = Authorized Membe "MGR" = Manager	of .	
	AMBR	BARAN BAYKAL	
		520 Brickell Kev Dr. ≠A1619 Miami, FL. 33131	9
	(Use attachment if necessary)		
ART	ICLE V: Effective date, if other tha	n the date of filing: ust be specific and cannot be more than f	(OPTIONAL)
the di	ate of filing.)		
Note Note	: If the date inserted in this block of	loes not meet the applicable statutory filing	g requirements, this date will not b
the d	ocument's effective date on the De	partment of State's records.	
ART	ICI.E VI: Other provisions, if any.		
	REQUIRED SIGNATURE;		
];	Baran Baykal massississississississississississississi	OF PAY LET VINDA COTALE
	Signatu	e of a member or an authorized represe	ntative of a member.
	I am aware tha	t is executed in accordance with section 60 tany false information submitted in a docut ird degree felony as provided for in s.817.1	ment to the Department of State
	RARA	N BAYKAL	
	SARA	Typed or printed name of signs	::
		Filing Fees:	
		les of Organization and Designation of F	Registered Agent
	\$ 30.00 Certified Copy (Or		
	\$ 5.00 Certificate of Statu	a (Ohmuai)	•