Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H210001574063)))



H210001574063ABC.

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To:

Division of Corporations

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From:

Account Name : CIKLIN LUBITZ
Account Number : 076376001447
Phone : (561)832-5900
Fax Number : (561)833-4209

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

Email Address: gwalk@ciklinlubitz.com

APR 22 AM 2:07

FLORIDA LIMITED LIABILITY CO. 7844C Gulf Blvd. LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
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2021 APR 22 PM 1: 35

Electronic Filing Menu

Corporate Filing Menu

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07489-58469



April 21, 2021

FLORIDA DEPARTMENT OF STATE
Division of Corporations

CIKLIN LUBITZ

SUBJECT: 7844C GULF BLVD. LLC

REF: W21000054612

We received your electronically transmitted document. Bowever, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The designation of the registered office and the registered agent, both at the same Florida street address, must be contained within the document pursuant to Florida Statutes. The registered agent must sign accepting the designation as required by Florida Statutes.

TWO PEOPLE IN THE RA SECTION. PLEASE INDICATE CLEARLY WHO IS THE RA

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

Alannah M Carranza Regulatory Specialist II New Filings FAX Aud. #: H21000157406 Letter Number: 121A00008277

ARTICLES	OF ORGANIZATION FOR FI	ORIDA LIMITEI	LIABILITY COMPANY	(H21000157406 3)	
ARTICLE I - Name: The name of the Limited Liab	ility Company is;				
7844C Gulf Blvd.					
(Must co	ntain the words "Limited Li	ability Company	, "L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and stree	address of the principal off	ice of the Limite	1 Liability Company is:		
Princ	ipal Office Address:		Mailing Addre	255:	
5627 Flume Drive	5627 Flume Drive		5627 Flume Drive		
Pace, FL 32571		Pac	Paco, FL 32571		
ARTICLE III - Registered A (The Limited Liability Comps another business entity with a The name and the Florida stre	iny cannot serve as its own F in active Plorida registration	Registered Agent, agent arc:		ividual or	
		Name			
	515 N. Flagler Drive,				
	Florida street address	(P.O. Box <u>NOT</u>	acceptable)		
	West Palm Beach	PL	33401		
	City	Clata	7in		

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..

(CONTINUED)

(H21000157406 3)

0.43.455.50 4 1 1	Name and Address:
"AMBR" = Authorized "MOR" = Manager	Member
MOR	Deborah Povsner
	3627 Flume Drive Pace. FL 32571
	Face. FL 32371
·	
·	
	
(Use attachment if nec	essury)
CLE V: Effective date, if effective date is listed, th te of filling.) If the date inserted in the	other than the date of filing:
CLE V: Effective date, if effective date is listed, the te of filing.) If the date inserted in the	other than the date of filing:
CLE V: Effective date, if effective date is listed, the te of filling.) If the date inserted in the cument's effective date of the date of the comment's effective date of the date of the date of the comment's effective date of the da	other than the date of filing:
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CLE V: Effective date, if effective date is listed, th te of filing.) If the date inserted in th cument's effective date of CLE VI; Other provisions REQUIRED SIGNATIONS This columns	other than the date of filing:

Filing Pees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Theodore J. Klein Attorney at Law 8030 Peters Road Building D Suite 104 Plantation, Florida 33324

FACSIMILE TRANSMITTAL COVER SHEET					
DATE:	4-22-2021	*****			
FROM:	Theodore J. Klein				
PHONE:	(954) 370-2533	FAX:	(954) 370-2566		
To: <u>) VISIO</u>	of Corporations	FAX:	1850, 1017-10381		
cc:		FAX:	()		
RE:	<u>H21000 1101 4143</u>				
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