

L21000218233

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



PICK-UP



WAIT



MAIL

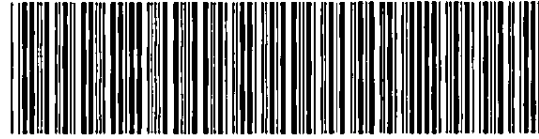
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer

Office Use Only



200366116122

05/14/21--01004--008 **160.00

2021 MAY 14 PM 12:02

RECEIVED

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2021 MAY 14 AM 10:16

RECEIVED

Handwritten signature and date 5-17-21

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: 1415 Jackson Street, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steven M. Hogan

Name of Person

Ausley McMullen

Firm/Company

P.O. Box 391

Address

Tallahassee, FL 32302

City/State and Zip Code

shogan@ausley.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven M. Hogan at (**850**) **425-5344**
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2001-11-16 PM 12:52
ED

**ARTICLES OF ORGANIZATION
OF
1415 JACKSON STREET, LLC**

The undersigned, pursuant to the provisions of Chapter 605, Florida Statutes, provides the following information for the purpose of forming a Limited Liability Company under the laws of the State of Florida.

**ARTICLE 1.
Name**

The name of the Limited Liability Company is **1415 Jackson Street, LLC.**

**ARTICLE 2.
Address**

The street and mailing address of the place of business in Florida is:

1132 Azalea Drive
Tallahassee, FL 32301

**ARTICLE 3.
Registered Agent and Registered Office**

The name and Florida street address of the initial registered agent in Florida for the Limited Liability Company are:

Alicia Smith
1132 Azalea Drive
Tallahassee, FL 32301

Having been named as registered agent and as the person to accept service of process for the above-stated limited liability company at the place designated in these Articles, 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, Florida Statutes.



Alicia Smith, Registered Agent

2021 MAR 1 PM 12:02

H-D

**ARTICLE 4.
Management**

The Limited Liability Company shall be managed by its members and is, therefore, a Member-Managed company.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization this 13 day of May, 2021.

In accordance with Section 605.0203(1)(b), F.S., the execution of this document constitutes an affirmation under 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 Section 817.155, F.S.



Robert A. Pierce
Authorized Representative of Members

2021 MAY 1 PM 12:02

130