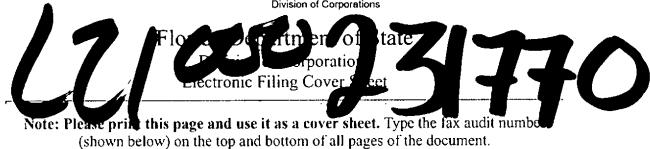
Division of Corporations



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H210002012133ABCM

To:	Division of Commonting	-
	Division of Corporations	•
	Fax Number : (850)617-6381	,
From:		
	Account Name : OLIVE JUDD, P.A.	
	Account Number : I20200000171	
	Phone : (954)334-2250	
	Fax Number : (888)503-5258	
	(444)****	
	the email address for this business entity to be used for futur nual report mailings. Enter only one email address please.**	.e
Em	ail Address:	

Everest Realty Eleven Florida, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

(((H21000201213 3)))

COVER LETTER

	ivision of Cor				
0.110.112.020		alty Eleven Florida,	LLC		
SUBJECT	:	Name	of Limited Liz	bility Company	
The enclose	ed Articles of	Organization and fe	e(s) are submit	ted for filing.	
Please retu	rn all correspo	ondence concerning	this matter to t	ne following:	1 6
	Stephen V. I	loffman, Esq.			; <u> </u>
	-		Name	of Person	<u> </u>
			140110	. Of t Cisott	, (
	Olive Judd,	P.A.			
			Firm	/Company	
	2426 East L	as Olas Boulevard			-
			A	ddress	
	Fort Lauder	dale, FL 33301			
			City/State	e and Zip Code	
-	shoffman@ol		d C C		
		•		re annual report notificat	1011)
For further i	nformation co	ncerning this matter	r, please call:		
	Stephen V. I	loffman	954 at (334-2250	
	Nam	ne of Person	Area Cod	e Daytime Telephor	ne Number
Enclosed is	s a check for t	he following amoun			
≘ \$125.00	Filing Fee	□\$130.00 Filing Certificate of Sta	atus Ce	\$155.00 Filing Fee & rtified Copy tional copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	<u>Mailir</u>	ng Address		Street Address	
		iling Section		New Filing Section D	
		on of Corporations Box 6327		The Centre of Tallah 2415 N. Monroe Stro	
		nassee, FL 32314		Tallahassee, FL 3230	

Page: 3 of 4

Dallas, TX 75254

(((H21000201213 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: Everest Realty Eleven Florida, 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: 5100 Belt Line Rd Suite 310 Suite 310

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:

Olive Judd, P.A.

Name

2426 East Las Olas Boulevard

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

Fort Lauderdale FL 33301

City State Zip

Dallas, TX 75254

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 flatilities 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)

ARTICLE IV-

To: 18506176381@rctax.com Fax: (850) 617-6381

(((H21000201213 3)))

<u>l'itle:</u> 'AMBR" = Authorized Member	Name and Address:	
'MGR" = Manager		
MGR	Marc Sparks	
33333	5100 Belt Line Rd, Suite 310	· · · · · · · · · · · · · · · · · · ·
	Dallas, TX 75254	
		
		
		
(Use attachment if necessary)		
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