## 421000249508

(Req	uestor's Name)	
	· · · · · · · · · · · · · · · · · · ·	
(Add	ress)	
(Add	ress)	<del> </del>
(City/	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nar	ne)
(Doc	ument Number)	<del>.</del>
Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	





000365432470

85/04/21--01005--008 \*\*160.00

2021 HAY -4 PM 2: 34

## COVER LETTER

Company
r filing.
lowing:
Henry
erson
pany
•
R APT 14B
NY 1007/-
Ny 10026
enry Property Soutions agmail. ( ual report notification)
ual report notification)
<u> 325 - 9749                                   </u>
Daytime Telephone Number
0 Filing Fee & □□\$160.00 Filing Fee.
0 Filing Fee & □ □\$160.00 Filing Fee, Copy □ Certificate of Status &
copy is enclosed) Certified Copy
(additional copy is enclosed)
reet Address
w Filing Section Division
e Centre of Tallahassee
العام 15 N. Monroe Street, Suite 810 من العام 15 N. Monroe Street, Suite 810 من العام العام 15 N. Monroe Street, Suite 810 من العام العام 15 N. Monroe Street, Suite 810 من العام 15 N. Monroe Street 810 من العام 1

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ity Company, "L.L.C.," or "LLC.")
of the Limited Liability Company is:  Mailing Address:
7901 4th St N
STE 300
St. Permittourg Fl. 33700

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:

ARTICLE I - Name:

Northwest Registerd Agent
Name

1901 4th St N STE 360

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

St. Petersburg FL 33702

City State Zip

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)

2121 HAY -4 PM 2: 34

## ARTICLE IV-

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

"AMBR" = Aut "MGR" = Mana				
	ger	Marana Harri		
AMBR	<del></del>	Vivienne Henry		
		1370 5th ave 114th st Apt 14B New york, NY 10026		
	<del></del>			_
				—
			-	
	<del></del>			
			_	_
E V: Effective dective date is list	ate, if other than the da	ate of filing: (OPTIC specific and cannot be more than five business days p	rior to or	
E V: Effective dective date is list of filing.) the date inserted ment's effective	ate, if other than the dated, the date must be so in this block does not date on the Department	specific and cannot be more than five business days put the applicable statutory filing requirements, this	rior to or	
E V: Effective dective date is list of filing.) the date inserted ment's effective E VI: Other prov	ate, if other than the dated, the date must be so in this block does not date on the Departmentations, if any.	specific and cannot be more than five business days put the applicable statutory filing requirements, this	rior to or	
ective date is list of filing.) the date inserted	ate, if other than the dated, the date must be so in this block does not date on the Departmentisions, if any.  GNATURE:	specific and cannot be more than five business days put meet the applicable statutory filing requirements, this not of State's records.	rior to or	
E V: Effective dective date is list of filing.) the date inserted ment's effective E VI: Other proverse REQUIRED SI	ate, if other than the dated, the date must be so in this block does not date on the Departmentisions, if any.  GNATURE:  Signature of a pure of a	t meet the applicable statutory filing requirements, this not of State's records.  periber or an authorized representative of a member state in accordance with section 605.0203 (1) (b), Flori lise information submitted in a document to the Departm	rior to or date will a	not be
E V: Effective dective date is list of filing.) the date inserted ment's effective E VI: Other proverse of the EVI: Other provers	ate, if other than the dated, the date must be at in this block does not date on the Departmentisions, if any.  GNATURE:  Signature of a rather deconstitutes a third degree on the date on the Departmentisions.	t meet the applicable statutory filing requirements, this not of State's records.  perfiber or an authorized representative of a member state in accordance with section 605.0203 (1) (b), Florid like information submitted in a document to the Department of the Depa	rior to or date will a	s.
E V: Effective dective date is list of filing.) the date inserted ment's effective E VI: Other proverse of the EVI: Other provers	ate, if other than the dated, the date must be at in this block does not date on the Departmentisions, if any.  GNATURE:  Signature of a rather deconstitutes a third degree on the date on the Departmentisions.	t meet the applicable statutory filing requirements, this not of State's records.  permoer or an authorized representative of a member stated in accordance with section 605.0203 (1) (b), Florids information submitted in a document to the Department of the Departme	rior to or date will a	s.
E V: Effective dective date is list of filing.) the date inserted ment's effective E VI: Other proverse of the EVI: Other provers	ate, if other than the dated, the date must be at in this block does not date on the Departmentisions, if any.  GNATURE:  Signature of a rather deconstitutes a third degree on the date on the Departmentisions.	t meet the applicable statutory filing requirements, this not of State's records.  perfiber or an authorized representative of a member state in accordance with section 605.0203 (1) (b), Florid like information submitted in a document to the Department of the Depa	rior to or date will a	s.
E V: Effective dective date is list of filing.) the date inserted ment's effective E VI: Other proverse of the EVI: Other provers	ate, if other than the dated, the date must be at in this block does not date on the Departmentisions, if any.  GNATURE:  Signature of a rather deconstitutes a third degree on the date on the Departmentisions.	t meet the applicable statutory filing requirements, this not of State's records.  perimer or an authorized representative of a member state in accordance with section 605.0203 (1) (b), Florids in formation submitted in a document to the Department of the Departme	rior to or date will a	s. e 7221 HAY -
E V: Effective dective date is list of filing.) the date inserted ment's effective E VI: Other proverse SE VI:	ate. if other than the dated, the date must be standard must be standard on the Department is in this block does not date on the Department is in this document is executed am aware that any falsonstitutes a third degree.	perific and cannot be more than five business days port meet the applicable statutory filing requirements, this not of State's records.  periffer or an authorized representative of a member state in accordance with section 605.0203 (1) (b), Florists information submitted in a document to the Department for the Department of the Depart	rior to or date will a	s. se 200 KAY
E V: Effective dective date is list of filing.) the date inserted ment's effective E VI: Other proversely SI  REQUIRED SI	ate, if other than the dated, the date must be at in this block does not date on the Department isions, if any.  GNATURE:  Signature of a rather degree am aware that any factors it utes a third degree for Articles of O	t meet the applicable statutory filing requirements, this not of State's records.  perimer or an authorized representative of a member state in accordance with section 605.0203 (1) (b), Florids in formation submitted in a document to the Department of the Departme	rior to or date will a	s. s. e 7 2 1 KAY - 4
EV: Effective detive date is list filing.) he date inserted nent's effective EVI: Other provestive SI SI25.00 Filing S 30.00 Certif	ate. if other than the dated, the date must be standard must be standard on the Department is in this block does not date on the Department is in this document is executed am aware that any falsonstitutes a third degree.	period and cannot be more than five business days per the applicable statutory filing requirements, this not of State's records.  period or an authorized representative of a member state in accordance with section 605.0203 (1) (b), Floridate in accordance with section 605.0203 (1) (b), Floridate information submitted in a document to the Department felony as provided for in s.817.155, F.S.  I Pane Henry Typed or printed name of signee  Filing Fees:  Perganization and Designation of Registered Agent	r. da Statute ent of Stat	S. C. P.