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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : VCORP SERVICES, LLC

Account Number : I20080000067 Phone : (845)425-0077 Fax Number : (845)818-3588

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

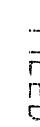
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FLORIDA LIMITED LIABILITY CO. 328 NW Spanish River Blvd LLC

Certificate of Status	0
Certified Copy	0
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Help



To. 18506176381

ARTICLESOFORGANIZATIONFORFLORIDA LIMITED LIABILITYCOMPANY

328 NW Spanish Rive				_	
(Must end w	ith the words "Limited L	iability Company,	"L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street add	dress of the principal offi	ce of the Limited I	Liability Company is:		
<u>Principal</u>	Office Address:		Mailing Address:		
3850 NW 2nd Ave, St	ite_#22		NW 2nd Ave. Suite #22	_	
Boca Raton, FL, 3343	1	Boca	Raion, FL, 33431	_ %	
			7 : D :	ال 11	<u></u>
ARTICLE III - Registered Agen (The Limited Liability Company canother business entity with an ac The name and the Florida street ac	cannot serve as its own R nive Florida registration.	egistered Agent. \	t's Signature: Ou must designate an individual observed.	2021 JUN 28 AM 7:	
(The Limited Liability Company canother business entity with an ac	namnot serve as its own Raive Florida registration. Iddress of the registered a Hillel Adelman	egistered Agent. \	ou must designate an individual obs	* 	
(The Limited Liability Company canother business entity with an ac	namnot serve as its own Raive Florida registration. Iddress of the registered a Hillel Adelman	egistered Agent. \) gent are:	ou must designate an individual obs	AM 7: 1	
(The Limited Liability Company canother business entity with an ac	cannot serve as its own Relive Florida registration. Iddress of the registered a Hillel Adelman	egistered Agent, Y) gent are: Name	ou must designate an individual on SS	AM 7: 1	
(The Limited Liability Company canother business entity with an ac	cannot serve as its own Retive Florida registration. Iddress of the registered a Hillel Adelman 272 NW 45th St.	egistered Agent, Y) gent are: Name	ou must designate an individual on SS	AM 7: 1	ってて

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, Thereby 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)

Page 1 of 2

Page, 3 of 3

ARTICLE IV-

eccino" — a		Name and Address:
	uthorized Member	
'MGR" = Ma	nager	1911 4 4 4 4
AMBR		Hillet Adelman
		272 NW 45th St.
		Boca Raton, FL, 33431
		
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