

(Requestor's Name)
(Address)
(.	Address)
(1	City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
. (E	Business Entity Name)
])	Document Number)
Certified Copies	Certificates of Status
Special Instructions t	o Filing Officer:
	. <u>. </u>





07/27/21--01002--029 **125.00

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

	<u> </u>
RHS PROPERTY MANAGMENT LLC	
	Art of Inc. File
	LTD Partnership File
	Foreign Corp. File
	L.C. File
	Fictitious Name File
	Trade/Service Mark
	Merger File
	Art. of Amend. File
	RA Resignation
	Dissolution / Withdrawal
	Annual Report / Reinstatement
	Cert. Copy
	Photo Copy
	Certificate of Good Standing
	Certificate of Status
	Certificate of Fictitious Name
	Corp Record Search
	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
•	Vehicle Search
	Driving Record
Requested by:	UCC 1 or 3 File
N	UCC 11 Search
Name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

COVER LETTER

TO: New Filing Section Division of Corporations				
SUBJEC	iran	Management, LLC		
500000	T:	Name of Lim	nited Liability Company	
The enclo	osed Articles of Or	ganization and fee(s) are	submitted for filing.	
Please ret	turn all correspond	ence concerning this ma	tter to the following:	
	Jay E. Auerbach	, Esq.		
	-		Name of Person	.
	KHANI & AUE	RBACH		
			Firm/Company	
	2338 Hollywood	l Blvd.		
			Address	_
	Hollywood, FL	33020		
	inv@holluwood		ity/State and Zip Code	
	jay@hollywood- E-m		for future annual report notification	on)
For further	information conce	rning this matter, please	call:	
	July A	orbach at c	rea Code Daytime Telephone	77
	(Name o	Person A	rea Code Daytime Telephone	Number
Enclosed	is a check for the f	ollowing amount:		
□\$125.0	00 Filing Fee C	3\$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)
	<u>Mailing A</u> New Filin		Street Address New Filing Section Di	vision
		f Corporations	The Centre of Tallaha 2415 N. Monroe Stree	ssee

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

SECRETA SEE, FL

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

The name of the Dimited Figuria	y Company is:		SECT
RHS Property Manag	ement, LLC		7.
		ity Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street ac	idress of the principal office	of the Limited Liability Company is:	
Princips	ol Office Address:	Mailing Address:	
401 Golden Isles Driv Hallandale Beach, FL		401 Golden Isles Drive, #209 Hallandale Beach, FL 33009	
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own Regictive Florida registration.)	stered Agent. You must designate an individ	lual or
	•		
	Jay E. Auerebach Nan	ne	
	2338 Hollywood Blvd. Florida street address (P.O). Box NOT acceptable)	
	Hollywood, FL 33020	- ,	

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.

State

City

Registered Agent's Signature (REQUIRED)

Zip

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Memb	Name and Address:
"MGR" = Manager	er
MGR	Pound Sugaran
MOK	Ronald Sussman 401 Golden Isles Drive, #209
	Hallandale Beach, FL 33009
	(2) n
	TO FAT
	$\mathbb{T}[q]$
	TAT
(Use attachment if necessary)	
c document's effective date on the De TICLE VI: Other provisions, if any.	does not meet the applicable statutory filing requirements, this date will not be listed a partment of State's records.
REQUIRED SIGNATURE:	
Signatu	re of a member or an authorized representative of a member.
This documen I am aware the	t is executed in accordance with section 605.0203 (1) (b), Florida Statutes; t any false information submitted in a document to the Department of State irrd degree felony as provided for in s.817.155, F.S.
D1	S
Konald	Sussman Typed or printed name of signee
	•
\$125 00 Filing Fee for Autic	Filing Fees: les of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Or	
\$ 5.00 Certificate of Statu	
a site detrimente di Ottitu	· (Alsonia)

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

ARTICLE IV-