# L21000 417259

(Requestor's Name)							
(Address)							
(Address)							
(City/State/Zip/Phone #)							
PICK-UP WAIT MAIL							
(Business Entity Name)							
,							
(Document Number)							
(00000000000000000000000000000000000000							
Certified Copies Certificates of Status							
Gertified Goyles Gertified as of Glades							
Special Instructions to Filing Officer:							

Office Use Only



100372296701

, <u>;</u>.

100" SEP 22 PH 3: 01



# Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301

• • • •

850.656.7956 Fax: 850.656.7953 www.incserv.com



# **ORDER FORM**

**TO** Florida Department of State

FROM

Melissa Moreau

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

850.656.7953

corphelp@dos.myflorida.com

850-245-6051

REQUEST DATE 9/22/2021

PRIORITY Regular Approval OUR REF\_# (Order\_ID#) 952777

ORDER ENTITY TREO PALM EAST, LLC

_						 
201	EACI	CDEDEADL	I THE ENI	OWING	SERVICES:	
		FERFURP	I INE PULI	COLLIAC	JEKYILEJ:	
_				<u>-</u> ,,		 <del></del>
	TDEA	DALES CA	XT 110 /	<b></b> .		

TREO PALM EAST, LLC (FL)

Please file the attached articles and provide a certified copy and certificate of status.

NOTES:

\$160.00 Authorized

# RETURN/FORWARDING INSTRUCTIONS:\_

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

### ARTICLES OF ORGANIZATION

### **OF**

### TREO PALM EAST, LLC

Pursuant to Section 605.0201 of the Florida Statutes, the undersigned hereby files these Articles of Organization as follows:

### ARTICLE I - NAME

The name of the Limited Liability Company is Treo Palm East, LLC.

### **ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is 5901 SW 74<sup>th</sup> Street, Suite 400, Miami, Florida 33143.

### ARTICLE III - INITIAL REGISTERED AGENT

The street address of the initial Registered Office of this Company in the State of Florida shall be 5901 S.W. 74<sup>th</sup> Street, Suite 400, Miami, Florida 33143. The name of the initial Registered Agent of this Company at the above address shall be Alfredo D. Xiques.

### **ARTICLE IV - DURATION**

The period of duration for the Limited Liability Company is perpetual.

IN WITNESS WHEREOF, the undersigned authorized representative has hereunto set his hand and seal this 21st day of September, 2021.

Name: Rolando Delgado Title: Authorized Agent



## CERTIFICATE DESIGNATING REGISTERED AGENT AND REGISTERED OFFICE

Pursuant to the provisions of Section 605.0113, Florida Statutes, the undersigned submits the following statement in designating the registered office/registered agent:

Treo Palm East, LLC, desiring to organize as a limited liability company under the laws of the State of Florida has designated 5901 S.W. 74<sup>th</sup> Street, Suite 400, Miami, Florida 33143 as registered office and named Alfredo D. Xiques as the initial registered agent.

By:

Rolando Delgado Authorized Agent

Having been named Registered Agent for the above stated limited liability company, at the designated Registered Office, the undersigned hereby accepts said appointment and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of the undersigned's duties, and the undersigned is familiar with and accepts the obligations of the undersigned's position as registered agent as provided for in Section 605.0113, Florida Statutes.

Alfredo

Alfredo D. Xiques Registered Agent