

L21000427630

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

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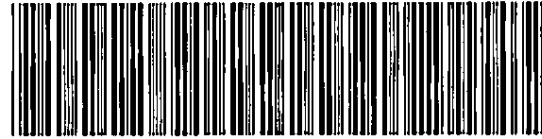
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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TALLAHASSEE, FL

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WALK IN

PICK UP: 9/30 DANNY

XX CERTIFIED COPY _____
PHOTOCOPY _____
CUS _____
XX FILING LLC

1. PSN AT SOLO LLC
(CORPORATE NAME AND DOCUMENT #)
2. _____
(CORPORATE NAME AND DOCUMENT #)
3. _____
(CORPORATE NAME AND DOCUMENT #)
4. _____
(CORPORATE NAME AND DOCUMENT #)
5. _____
(CORPORATE NAME AND DOCUMENT #)
6. _____
(CORPORATE NAME AND DOCUMENT #)

**SPECIAL
INSTRUCTIONS:** _____

ARTICLE OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I.

The name of the Limited Liability Company is:

PSN AT SOLO LLC

ARTICLE II.

The address and street address of the principal office of the Limited Liability Company is:

7111 TAFT ST

HOLLYWOOD FL 33024

The mailing address of the Limited Liability Company is:

7111 TAFT ST

HOLLYWOOD FL 33024

ARTICLE III.

The purpose for which this Limited Liability Company is organized is:

Any and all lawful business.

ARTICLE IV.

The name and the Florida street address of the registered agent are:

AKBAS, JAIME C

7111 TAFT ST

HOLLYWOOD FL 33024

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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

9-28-2021

Date:

ARTICLE V.

The name and address of each Manager or Managing Member is as follows:

Name and Address:

Title: MGRM

AKBAS, JAIME C

7111 TAFT ST

HOLLYWOOD FL 33024

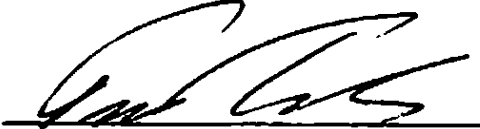


ORNARLI, FUAT

Title: MGRM

7111 TAFT ST

HOLLYWOOD FL 33024



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ED

In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155.F.S.



Signature of a member or an authorized representative of a member.

Jaim C. Akbas

Typed or printed name of signee

9-28-2021

Date