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

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2021 OCT 29 PM 2: 46

CAPITAL CONNECTION, INC.

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

Westside Market Rosy	vll LLC			
	<u></u>			
				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
<u> </u>				Fictitious Owner Search
Signature				Vehicle Search
				Driving Record
Requested by: Seth	10/27/21	,		UCC 1 or 3 File
	$\frac{10/27/21}{5}$			UCC 11 Search
Name	Date	Time		UCC II Retrieval
Walk-In	Will Pick Up			Courier
174 Pander's Printing + Thom seville GA 8/00			i	

COVER LETTER

TO:	New Filing Sec Division of Cor				
SUBJ	ECT:	Name of	Limited Li	ability Company	
The en	closed Articles of	Organization and fee(s	.) are submi	tted for filing.	
Please	return all correspo	endence concerning thi	s matter to t	he following:	
	Matthew Or	nstein			
			Nam	e of Person	
			Firm	√Company	
	98 Orange S	lreet			
			۸,	Address	
	Neptune Bea	ach, FL 32266			
	Man D O Santon	arkaldian saan	City/Stat	e and Zip Code	
		mholdings.com E-mail address: (to be t	used for futi	ire annual report notificat	ion)
For furt	her information co	ncerning this matter, p	lease call:		
	Matthew Kay	ynard al	678 L(904-9954	
	Nam	e of Person	·——	le Daytime Telephon	
Enclos	sed is a check for t	he following amount:			
	25.00 Filing Fee	CIS130.00 Filing Fe Certificate of Status	Co	\$155.00 Filing Fee & ortified Copy tional copy is enclosed)	U\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisio P.O. B	g Address iling Section on of Corporations ox 6327 assec, FL 32314		Street Address New Filing Section D The Centre of Tallah 2415 N. Moaroe Stre Tallahassee, FL 3230	assee eet, Suite 810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Westside Market R	aswell LLC		
(Must co	ntain the words "Limited L	iability Company, "L.	.L.C.," or "LLC.")
ARTICLE II - Address:			Attra Zona a tan
he mailing address and street	address of the principal of	lice of the Limited Li	ability Company is:
<u>Princ</u>	ipal Office Address:		Mailing Address:
98 Orange Street		98 Ora	nge Street
Neptune Beach, FI	J 32266	Neptun	e Beach, FL 32266
The Limited Liability Compa	ny cannot serve as its own l	Regi <mark>stered A</mark> gent, Yo	
ARTICLE III - Registered A The Limited Liability Compa mother business entity with a The name and the Florida stree	ny cannot serve as its own l n active Florida registration	Registered Agent, Yo 1.)	s Signature:
The Limited Liability Compa- mother business entity with a	ny cannot serve as its own l n active Florida registration	Registered Agent, Yo 1.)	s Signature:
The Limited Liability Compa- mother business entity with a	ny cannot serve us its own l n active Florida registration et address of the registered	Registered Agent, Yo 1.)	s Signature:
The Limited Liability Compa- mother business entity with a	ny cannot serve us its own l n active Florida registration et address of the registered	Registered Agent. Yo 1.) agent are: Name	s Signature:
The Limited Liability Compa- mother business entity with a	ny cannot serve as its own in active Florida registration at address of the registered NRAI Services, Inc.	Registered Agent. Yo 1.) agent are: Name	s Signature: u must designate an individual o
The Limited Liability Compa- mother business entity with a	ny cannot serve as its own I n active Florida registration et address of the registered NRAI Services, Inc.	Registered Agent. Yo 1.) agent are: Name	s Signature: u must designate an individual o

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 t am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Jannifar Tasavoli - Jennifer Tasavoli Assistant Secretary
Registered Agent's Signature (REQUIRED)

(CONTINUED)

2821 OCT 29 PM 2: 46

Title: "AMBR" = Autl	torized Member	Name and Address:
"MGR" = Mana		
MGR		Matthew Ornstein
		98 ORANGE STREET
		NEPTUNE BEACH, FL 32266
		
(Use attachment	if necessary)	
TLE V: Effective of ffective date is fix e of filing.) If the date inserted	fate, if other than the da ted, the date must be s	the of filing:
TLE V: Effective of ffective date is live of filing.) If the date inserter nument's effective TLE VI: Other pro	fate, if other than the dated, the date must be so die in this block does not date on the Departmen	specific and cannot be more than five business days prior to or 90 d t meet the applicable statutory filing tequirements, this date will not b
LE V: Effective of ffective date is live of filing.) If the date inserted ument's effective (LE VI: Other pro	date, if other than the dated, the date must be so din this block does not date on the Department visions, if any.	specific and cannot be more than five business days prior to or 90 d t meet the applicable statutory filing tequirements, this date will not b
LE V: Effective of flective date is live of filing.) If the date inserted ument's effective (LE VI: Other pro	fate, if other than the dated, the date must be sid in this block does not date on the Department visions, if any.	specific and cannot be more than five business days prior to or 90 d t meet the applicable statutory filing requirements, this date will not but of State's records.
T.E.V: Effective of ffective date is list of filing.) If the date inserter nument's effective T.E.VI: Other pro	late, if other than the dated, the date must be sid in this block does not date on the Department visions, if any. IGNATURE: Signature of a rank document is excelled an aware that any fall.	specific and cannot be more than five business days prior to or 90 d t meet the applicable statutory filing tequirements, this date will not b

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)