L21000468009

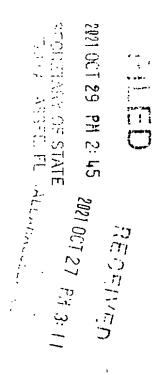
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400373722464

10/27/21--01022--015 **125.00



 $\frac{1}{2}$

CAPITAL CONNECTION, INC.

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

98 ORANGE STREE	ET 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 / Withdrawa)
				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
6:				Fictitious Owner Search
Signature				Vehicle Search
				Driving Record
Requested by: Seth	10/05/01			UCC 1 or 3 File
	$\frac{10/27/21}{2}$	-		UCC 11 Search
Name	Date	Time		UCC 11 Retrieval
Walk-In	•			Courier

COVER LETTER

TO:	New Filing Sec Division of Cor				
CUD IN	· vp				
SUBJEC	<u></u>	Name	of Limited Liabi	lity Company	
The encl	losed Articles of	Organization and fe	c(s) are submitte	d for filing,	
Please ro	turn all correspo	ondence concerning	this matter to the	following:	
	Matthew Or	nstein			
			Name o	f Person	
			Firm/C	ompany	
	98 Orange S	Ireel			
	 _		Ado	Iress	
	Neptune Bea	nch, F1.32266			
	Mault@faa		City/State a	nd Zip Code	
		mholdings.com E-mail address: (to b	oe used for future	annual report notificati	ion)
For furthe	er information co	ncerning this matter	, please call:		
	Matthew Kay	ynard	678	904-9954	
Name of Person		Area Code	\ 		
Fuelnes	d le a chaob for t	he following amoun	r <i>•</i>		
	.00 Filing Fee	□\$130.00 Filing Certificate of Sta	lice & □\$! dus Certi	55.00 Filing Fee & fied Copy nal copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisio P.O. B	ng Address iling Section on of Corporations ox 6327 assec, FL 32314		Street Address New Filing Section D The Centre of Tallahi 2415 N. Monroe Stre Tallahassee, FL 3230	assee et, Suite 810

AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

98 Orange Street LLC	<u> </u>
(Must contain the words "Lit	mited Liability Company, "L.L.C.," or "LLC.")
RTICLE II - Address: ne mailing address and street address of the princ	cipal office of the Limited Liability Company is:
Principal Office Addres	s: Mailing Address:
98 Orange Street	98 Orange Street
Neptune Beach, FL 32266	Neptune Beach, FL 32266
RTICLE III - Registered Agent, Registered Con the Limited Liability Company cannot serve as in the control business entity with an active Florida region of the control of	Office, & Registered Agent's Signature: ts own Registered Agent. You must designate an individual or istration.)
RTICLE III - Registered Agent, Registered C he Limited Liability Company cannot serve as it	Office, & Registered Agent's Signature: ts own Registered Agent. You must designate an individual or istration.)

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..

Florida street address (P.O. Box NOT acceptable)

Plantation

City

FL.

State

Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)

2021 OCT 29 PM 2: 45

"AMBR" = Authorized Member "MGR" = Manager MGR	
•	
MGR	
111(111	Matthew Ornstein
	98 ORANGE STREET
	NEPTUNE BEACH, FL 32266
	
nective date is usted, the date must be s e of filing.) If the date inserted in this block does not	ne of filing:
ument's effective date on the Departmen LE VI: Other provisions, if any.	it of State's records.
	a Dala
REOUIRED SIGNATURE:	11/10/20
Signature of a n This document is exce	nember or an authorized representative of a member, auted in accordance with section 605.0203 (1) (b), Florida Statutes, like information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S.

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