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(shown below) on the top and bottom of all pages of the document.



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : HUBCO

Account Number : 104662003400 Phone : (516)935-3940 Fax Number : (516)935-3088

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: HARRY@SAMUELSACCOUNTING.COM

FLORIDA LIMITED LIABILITY CO. SALGATHOR MANAGEMENT LLC

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⊕ 11/05/2021**∡**2:17 PM

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## AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

## SALGATHOR MANAGEMENT LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

## **ARTICLE II - Address:**

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

Principal Office Address:

Mailing Address:

2901 STIRLING ROAD 308

2901 STIRLING ROAD 308

FT LAUDERDALE, FL 33312

FT LAUDERDALE, FL 33312

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

HARRY M. SAMUELS

Nam

2901 STIRLING ROAD 307

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

FT LAUDERDALE

FT 33312

City

Zip

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 600, P.S..

Registered Agent's Signature (REQUIRED)

HARRY M. SAMUELS

(**C**ONTINUED)

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H21000411651

<u> </u>	Name and Address:
"MGR" = Manager	GREGORY H. CROUCH
MGR	3143 ARBOR LANE
	HOLLYWOOD, FL 33021
MGR	HARRY M. SAMUELS
	3143 ARBOR LANE HOLLYWOOD, FL 33021
	FIGEL TWOOD, TE GOOZ !
(Use attachment if necessary)	
ective date is listed, the date must be of filing.)	date of filing:
E V: Effective date, if other than the	e specific and cannot be more than five business days prior to or 9
E V: Effective date, if other than the ective date is listed, the date must be of filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a (In accordance with sect constitutes an affirmatic I am aware that any false)	e specific and cannot be more than five business days prior to or 9  MITA (MM)  a member or an authorized representative of a member.
E V: Effective date, if other than the ective date is listed, the date must be of filing.)  E VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a (In accordance with sect constitutes an affirmatic I am aware that any false)	a member or an authorized representative of a member.  tion 605.0203 (1) (b), Florida Statutes, the execution of this documen on under the penalties of perjury that the facts stated herein are true. see information submitted in a document to the Department of State