

L21000484141

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

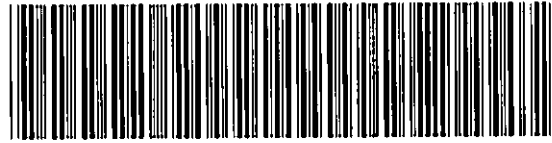
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



000372749580

11/12/21--01001--015 **125.00

ALL INFORMATION CONTAINED
HEREIN IS UNCLASSIFIED
DATE 11/12/21 BY 60322

RECEIVED
2021 NOV 12 AM 11:26

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2021 NOV 12 AM 10:37
SECRETARY OF STATE
TALLAHASSEE, FL



Department of State
Division of Corporations
Date: 11/12/21

American Expediting (Stealth Courier)
1531 Commonwealth Business Dr.
Ste 105
Tallahassee, Fl. 32303
850-294-5632

Stealth Courier Box

Company: Siphon Investment LLC
Requester: Trumbach Law
Order: 13556820

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SIPHON INVESTMENT LLC

SUBJECT: _____
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

TYLER ANDREW TRUMBACH

Name of Person

LAW OFFICES OF TYLER A TRUMBACH

Firm/Company

4405 Peters Road

Address

PLANTATION, FL 33317

City/State and Zip Code

TTRUMBACH@TRUMBACHLAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

TYLER A TRUMBACH 561 312-1416

Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|---|---|
| <input checked="" type="checkbox"/> \$125.00 Filing Fee | <input type="checkbox"/> \$130.00 Filing Fee & Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
|---|---|---|---|

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SIPHON INVESTMENT LLC

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

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ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

4405 Peters Road

PLANTATION, FL 33317

4405 Peters Road

PLANTATION, FL 33317

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:

LAW OFFICES OF TYLER A TRUMBACH PA

Name

4405 Peters Road

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

PLANTATION

FL

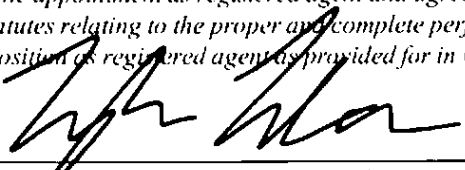
33317

City

State

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 605, F.S.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

PATRICK ANTOINE

4405 Peters Road

PLANTATION, FL 33317

(Use attachment if necessary)

SECRETARY OF STATE
HALL OF RECORDS
TALLAHASSEE, FL

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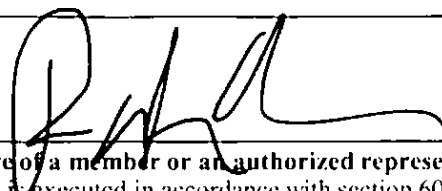
ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:



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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

PATRICK ANTOINE

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)