

L21000484792

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)



PICK-UP



WAIT



MAIL

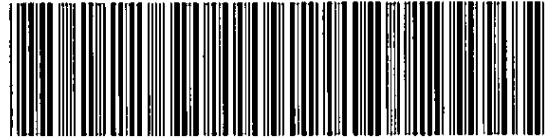
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



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11/15/21--01002--015 **125.00

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2021 NOV 15 AM 11:14

SECRETARY OF STATE
TALLAHASSEE, FL

FILED

2021 NOV 15 PM 1:42

SECRETARY OF STATE
TALLAHASSEE, FL

11/15/2021 11:10am
STN #236

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: Chelsea Home & Property, LLC
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:

Chelsea Reyes

Name of Person

Firm/Company

4920 Sand Dune Circle, Unit 104

Address

West Palm Beach, FL, 33417

City/State and Zip Code

Office@ChelseaPropertyManagement.pro

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

For further information concerning this matter, please call:

Chelsea Reyes

at (415)

858-8023

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$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

Call when
ready
850-562-6098

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Chelsea Home & Property, LLC

(Must contain 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:

4920 Sand Dune Cir

4920 Sand Dune Cir

Unit 104

Unit 104

West Palm Beach, FL 33417

West Palm Beach, FL 33417

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:

Chelsea Reyes

Name

4920 Sand Dune Cir, Unit 104

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

West Palm Beach, FL 33417

I, having been named as registered agent and to accept service of process for the above stated limited liability company in 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.

Chelsea Reyes
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FL

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 _____

Chelsea Reyes

4920 Sand Dune Cir. Unit 104

West Palm Beach, FL 33417

(Use attachment if necessary)

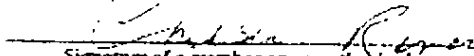
ARTICLE V: Effective date, if other than the date of filing _____ (OPTIONAL)

(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 statute filing requirements, the filing will be rejected.

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.

Chelsea Reyes

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)