Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : WALSH BANKS LAW Account Number : I20210000008 Phone : (407)259-2426 Fax Number : (407)391-3626

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

Email Address: service@walshbanks.com

FLORIDA LIMITED LIABILITY CO. US 27 LAKE WALES LLC

Certificate of Status	: 0
Certified Copy	0
Page Count	04
Estimated Charge	\$125.00

Of

To: 18506176361 From: 14073913626 Date: 11/23/21 Time: 3:57 PM Page: 03/05

COVER LETTER

TO:	New Filing Section Division of Corporations	
SUBJE	US 27 LAKE WALES LLC	
SUBJE	Name of Limited Liability Company	
The enc	losed Articles of Organization and fee(s) are submitted for filing.	
Picase re	eturn all correspondence concerning this matter to the following.	
	BRIAN M. WALSH	
	Name of Person	
	Walsh Banks Law Firm/Company	,
	Trini Company 27	
	PO Box 2271 Address Firm/Company Address	: (7* 2,
	Address	
	Orlando, FL 32802	
	City/State and Zip Code SERVICE@WALSHBANKS.COM	
	E-mail address: (to be used for future annual report notification)	
For furthe	er information concerning this matter, please call.	
	Brian M. Walsh, Esq 407 259-2426	
	Name of Person Area Code Daytime Telephone Number	
Enclosed	d is a check for the following amount.	
≡\$ 125.	.00 Filing Fee	
	Mailing AddressStreet AddressNew Filing SectionNew Filing Section DivisionDivision of CorporationsThe Centre of Tallahassee	

P.O. Box 6327 Tallahassee, FL 32314 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

To: 18506176301 From: 14073913626 Date: 11/23/21 Time: 3:57 PM Page: 04/05

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTIC	CLEI.	· Name:
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The name of the Limited Liability Company is:

US 27 LAKE WA	ALES LLC				
		 	 	4	

US 27 LAKE WALF	S LLC				
(Must cont	ain the words "Limited	Liability Company,	"L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street ad	ddress of the principal c	office of the Limited	Liability Company is:		
Princip	al Office Address:		Mailing Addre	ess:	
8107 Vineland Ave			ndfall Cir		
Orlando, FL 32821		East	Hampton, NY 11937		
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own	i Registered Agent. 1		dividual of φ_2	ŽUZ1
The name and the Florida street	address of the registere	d agent are:		· ():	ZUZI NIOV 2
	Walsh Banks Law				٠, ک
		Name		(. <u> </u>	
	228 Hillcrest St			i,	"क्राइक-
	Florida street addres	ss (P.O. Box <u>NOT</u> ac	cceptable)	ر	· ·
	Orlando	FI.	32801	د	S
	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. 1 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)

To: 18506176361 From: 14073913626 Date: 11/23/21 Time: 3:57 PM Page: 05/05

ARTICLE IV-

<u>litle:</u>	Name and Address:
AMBR* = Authorized Member	
MGR* = Manager	
MGR	Robert White
	c/o 228 Hillcrest St
	Orlando, FL 32801
	
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