Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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	Division of Cor	porations	•
	Fax Number	: (850)617-6381	
From:			
	Account Name	: FL PATEL LAW PLLC	
	Account Number	: I20170000097	
	Phone	: (727)279-5037	
	Fax Number	: (727)888-1294	
anı	nual report maili	s for this business entity to be used for for fings. Enter only one email address please.** apportua [[putellaw.com]]	

FLORIDA LIMITED LIABILITY CO. 1029 Nassau, LLC

Certificate of Status 1 Certified Copy 0 Page Count 03

Estimated Charge

\$130.00



COVER LETTER

Friday, December 10, 2021

To: New Filing Section
Division of Corporation

Subject: 1029 NASSAU, 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:

FL Patel Law PLLC

360 Central Avenue 8th Floor St. Petersburg, Florida 33701 Fax: 727-888-1294

For further information concerning this matter, please call or e-mail:

Jamie Primeau 727-279-5037 or e-mail at Support(ii:flpatellaw.com

Enclosed is our fax filing coversheet for \$130.00 for Filing Fee & Certificate of Status

FL Patel Law PLLC

ARTICLES OF ORGANIZATION

FOR

1029 NASSAU, LLC

A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I.

The name of the Limited Liability Company is: 1029 Nassau, LLC (the "Company").

ARTICLE II. Address

The principal office and mailing address of the Company is:

1716 MacGregor Drive Plano, Texas 75093

2021 DEC 14 12 2142

ARTICLE III. Registered Agent, Registered Office, & Registered Agent's Signature

The name and the Florida Street Address of the Registered Agent are:

FLP RA Services LLC 360 Central Avenuc Suite 800 Saint Petersburg, FL 33701

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.

Ada Reyes

FLP RA Services LLC

O 12/14/2021 8:52 AM

ARTICLE IV. Authorized Members and Managers

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	
MGR	James Douglas 1716 MacGregor Drive Plano, Texas 75093

ARTICLE V.

The Effective date shall be the date of filing.

90/h	(sign)
Signature of a member or an authorized repres This document is executed in accordance with section 605 I am aware that any false information submitted in a document constitutes a third degree felony as provided for	5.0203 (1) (b), Florida Statutes, ment to the Department of State
James Douglas	
Authorized Representative/M	1ember