

12/29/2021 14:10

17184082550

From: 17184082550 To: 18506176381

P: 1/3

12/29/21, 2:06 PM

Handwritten: 172 000000 464

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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.

((H21000471743 3)))



H210004717433ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : USACORP INC.
Account Number : 120130000019
Phone : (718)362-4789
Fax Number : (718)408-2550

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

Email Address: mshomes@gmail.com

2021 DEC 29 PM 13:34

2021 DEC 29 AM 11:24

ED

FLORIDA LIMITED LIABILITY CO.
MS FL HOMES LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

Handwritten signature

((H21000471743 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

MS FL HOMES 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:

320 NW 183 St
Miami, FL 33169

544 Park Ave, Unit 116
Brooklyn, NY 11205

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:

Levi Vogel

Name

9507 NW 38th Street

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

Coral Springs

FL

33065

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..

/s/ Levi Vogel

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

2021 DEC 29 AM 11:24
ED

