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(Re	equestor's Name)	
(Ad	ldress)	 -
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Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer	

Office Use Only



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SECRETARY OF STATE JAY-4 PH 4: 12

2022 JAN -4 AM 8: 11

CORPORATE ACCESS, ____

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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		PICK	UP:	01/04/2022	_	
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	XX	FILING	LLC		_	
1.		CORPORATE NAME AND DOCUM		ACE LLC		
2.		(CORPORATE NAME AND DOCUM	IENT #)			
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5.		(CORPORATE NAME AND DOCUM	IENT #)			
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COVER LETTER

TO:	New Filing S Division of C				
SUBJE		Water 23rd Place LLC			
001001		Name of Li	mited Liab	ility Company	
The enc	losed Articles	of Organization and fee(s) a	re submitte	d for filing.	
Please n	etum all corres	pondence concerning this m	atter to the	following:	
	Matt Kuchi	I			
			Name o	f Person	
	Land and V	Vater Investments, LLC			
			Firm/C	опрапу	
	503 Center	Street			
			Add	ress	
	Lake Gener	va, WI 53147			
	matt@keysto		City/State au	nd Zip Code	<u></u>
	····actual Ecyste	E-mail address: (to be used	for future	annual report notificat	
For further	r information co	oncerning this matter, please			,
	Matt Kuehl	26 8t (52	745-6603	
	Nan	ne of Person A	rea Code	Daytime Telephon	e Number
Enclosed	is a check for (the following amount:			
	00 Filing Fee	\$130.00 Filing Fee &	□c:c	6 00 TW T 8	
	or ming rec	Certificate of Status	Certifi	5,00 Filing Fee & ed Copy al copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	<u>Mailir</u>	ig Address		Street Address	
		iling Section		New Filing Section Di	
		on of Corporations		The Centre of Tallaha	
		ox 6327 assee, FL 32314		2415 N. Monroe Stree Tallahassee, FL 3230	

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2022 JAN -4 AM 8: 11

SECRETARY OF STATE TALLAHASSEE, FL

ARTICLE I - Name:

The name of the Limited Liability Company is:

	TALLA
Land and Water 23rd Place LLC	
(Must contain the words "Limited Liability Cor	mpany, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the L	imited Liability Company is:
Principal Office Address:	Mailing Address:
503 Center Street	
Lake Geneva, WI 53147	

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:

Corporate Access, la	ac.	
	Name	
236 East 6th Avenue	.	
Florida street addres	ss (P.O. Box NOT ac	cceptable)
Tallahassee	FL	32303
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)

	DT	TOT	17	THE
4	ĸ	ICI		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	Land and Water Investments, LLC
	503 Center Street Lake Geneva, WI 53147
	Demo Othera, W1 33147
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	SECRETARY OF S
	SECRETAR
	2000年1月1日 - 2000年1月1日 - 2000年1日 - 20
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-	FA
RTICLE V: Effective date, if other than the date	e of filing:
an effective date is listed, the date must be sp	ecific and cannot be more than five business days prior to or 90 days after
date of filing.)	•
ote: If the date inserted in this block does not r	neet the applicable statutory filing requirements, this date will not be listed a
document's effective date on the Department	of State's records.
TICLE VI: Other provisions, if any.	
	
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
	The of the authorized warms to be
Signature of a me	ember of an authorized representative of a member.
Signature of a me This document is execut	ted in accordance with section 605.0203 (1) (b). Florida Statutes
Signature of a me This document is execut I am aware that any false	ted in accordance with section 605.0203 (1) (b), Florida Statutes.
Signature of a me This document is execut I am aware that any false	ted in accordance with section 605,0203 (1) (b) Florida Statutes

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)