

Jan. 7, 2022 5:24PM
1/7/22, 5:16 PM

GRAY ROBINSON

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.

((H22000010080 3)))



H220000100803ABCN

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 : GRAYROBINSON, P.A. - ORLANDO
Account Number : I20010000078
Phone : (407)843-8880
Fax Number : (407)244-5690

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

Email Address: tucker.thoni@gray-robinson.com

FLORIDA LIMITED LIABILITY CO.

150 SW Second Avenue QOZB LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

H22000010080 3

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

Name

The name of this Limited Liability Company is: 150 SW SECOND AVENUE QOZB LLC

ARTICLE II

Address

The initial mailing address and street address of the principal office of this Limited Liability Company is:

502 NW 16th Avenue, Suite 1
Gainesville, FL 32601

ARTICLE III

Purpose

This Limited Liability Company is organized to be a "qualified opportunity zone business," within the meaning of Section 1400Z-2 of the Internal Revenue Code of 1986, as amended (the "Code") and the Treasury Regulations proposed thereunder, and therefore, this Limited Liability Company is organized for the purpose of investing in "qualified opportunity zone business property" within the meaning of Section 1400Z-2 of Code and the Treasury Regulations thereunder, and for any other lawful business under Chapter 605, Florida Statutes.

ARTICLE IV

Management

This Limited Liability Company is to be managed by one or more managers and is, therefore, a "manager-managed" limited liability company.

Manager: Michael E. Warren

ARTICLE IV

Registered Agent, Registered Office & Registered Agent's Signature

The name and the Florida street address of the Registered Agent of this Limited Liability Company is:

Michael E. Warren
502 NW 16th Avenue, Suite 1
Gainesville, FL 32601

H22000010080 3

H22000010080 3

Having been named as registered agent to accept service of process for this limited liability company at the place so designated in these Articles of Organization, the undersigned hereby accepts this appointment and agrees to act in this capacity. The undersigned agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties and is familiar with and accepts the obligations of the undersigned's position as registered agent, as provided for in Chapter 605, Florida Statutes.

REGISTERED AGENT'S SIGNATURE

Michael E. Warren

In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided in Section 817.155, Florida Statutes.

AUTHORIZED REPRESENTATIVE'S SIGNATURE

Michael E. Warren, Authorized Representative

2022 JAN 16 AM 10:13

ED

H22000010080 3