

Division of Corporations

L2200003618830948

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.

(((H22000036188 3)))



H220000361883ABC/

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 : COGENCY GLOBAL, INC.
Account Number : I20000000088
Phone : (800)221-0102
Fax Number : (800)944-6607

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

Email Address: _____

SECRETARY OF STATE
FILED
1000101

22 JAN 27 PM 12:28

FILED

**FLORIDA LIMITED LIABILITY CO.
NORTH PARK VENTURES FLORIDA LLC**

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

2022 JAN 27 PM 3:47

FILED

22 JAN 27 PM 12: 28

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: North Park Ventures Florida 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:

Chad M. Poznansky

Name of Person

Clark Hill PLC

Firm/Company

130 E. Randolph Street, Suite 3900

Address

Chicago, IL 60601

City/State and Zip Code

cpoznansky@clarkhill.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Daniel M. Borek 312 312-360-2128

Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

22 JAN 27 PM 12: 28

SECRETARY OF STATE
TALLAHASSEE, FL 32301

ARTICLE I - Name:

The name of the Limited Liability Company is:

North Park Ventures Florida LLC

(Must contain 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:

1628 N. Wells, Unit 1
Chicago, IL 60614

1111 SW 1st Ave.
Unit 2625
Miami, FL 33130

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:

Robert Sekula

Name

1111 SW 1st Ave., Unit 2625

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

Miami FL 33130

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..

Robert Sekula

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE 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

MGR

Robert Sekula
1628 N. Wells, Unit 1
Chicago, IL 60614

MGR

Eric Turrin
1628 N. Wells, Unit 1
Chicago, IL 60614

MGR

Gediminas Bulota
1628 N. Wells, Unit 1
Chicago, IL 60614

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

The limited liability company shall be manager-managed.

REQUIRED SIGNATURE:

Robert Sekula

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Robert Sekula

Typed or printed name of signer

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)

REGISTRY OF STATE
FILED
JAN 27 2022

22 JAN 27 PM 12:28

FILED