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Division of Corporations

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## FLORIDA LIMITED LIABILITY CO. 610 Dixie LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	S125.00

2022 FE& -

Electronic Filing Menu Corporate Filing Menu

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Lia	bility Company is:		
610 Dixie LLC			
(Must e	end with the words "Limited	l Liability Company	7, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and stre	et address of the principal o	office of the Limited	Liability Company is:
<u> Prir</u>	cipal Office Address:		Mailing Address:
			. N. 100 ( 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
1316 N Dixie Hi	×		6 N Dixie Highway
Hollywood FL 3  ARTICLE III - Registered	Agent, Registered Office.	& Registered Agei	vwood FL 33020 nt's Signature:
Hollywood FL 3  ARTICLE III - Registered	Agent, Registered Office, hany cannot serve as its own an active Florida registratio	& Registered Agent. Registered Agent.	ywood FL 33020
ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, sany cannot serve as its own an active Florida registration cet address of the registered	& Registered Agent. Registered Agent.	vwood FL 33020 nt's Signature:
ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, hany cannot serve as its own an active Florida registratio	& Registered Agent. Registered Agent.	vwood FL 33020 nt's Signature:
ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, sany cannot serve as its own an active Florida registration cet address of the registered	& Registered Agent. on.) I agent are:	vwood FL 33020 nt's Signature:
ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, sany cannot serve as its own an active Florida registratic ect address of the registered David Hofman	& Registered Agent. On.) Lagent are: Name	vwood FL 33020  nt's Signature: You must designate an individual or
ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, sany cannot serve as its own an active Florida registratic cet address of the registered David Hofman	& Registered Agent. On.) Lagent are: Name	vwood FL 33020  nt's Signature: You must designate an individual or

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. Thereby 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)

Page 1 of 2

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The name and address of each person authorized to manage and control the Limited Liability Company:

"AMRR" = 0		Name and Address:	
	Authorized Member		
"MGR" = M:		David Hofman	
AMBR		1316 N Dixie Highway	_
		Hollywood FL 33020	
		110113 WOOD 1 L 33-02-0	<del></del>
AMBR		Eric Hofman	
ANTON	<del></del>	1316 N Dixie Highway	
		Hollywood FL 33020	_
		11017	<del></del>
			_
			_
	<del></del>		<del></del> -
			_
/I la	ent if necessary)		
	rted in this block does not me ve date on the Department of	er the applicable statutory filing requirements, this date will. State's records.	not be listed
•	orovisions, if any.		<del></del>
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REOUIRED	Signature of a men This document is executed a manager that any false is	Muy	
REOUIRED	Signature of a men This document is executed a manager that any false is	ber or an authorized representative of a member, d in accordance with section 605.0203 (1) (b), Florida Statute information submitted in a document to the Department of Stafelony as provided for in s.817.155, F.S.	
REOUTRED	Signature of a men This document is executed I am aware that any false is constitutes a third degree to	ber or an authorized representative of a member, d in accordance with section 605.0203 (1) (b), Florida Statute information submitted in a document to the Department of Stafelony as provided for in s.817.155, F.S.	
REOUTRED	Signature of a men This document is executed I am aware that any false is constitutes a third degree to	ber or an authorized representative of a member.  d in accordance with section 605.0203 (1) (b), Florida Statute information submitted in a document to the Department of Stafelony as provided for in s.817.155, F.S.  Typed or printed name of signee	
	Signature of a men This document is execute I am aware that any false i constitutes a third degree to  David Hofman	ber or an authorized representative of a member, d in accordance with section 605.0203 (1) (b), Florida Statute information submitted in a document to the Department of Stafelony as provided for in s.817.155, F.S.	

Page 2 of 2

S 30.00 Certified Copy (Optional)S 5.00 Certificate of Status (Optional)

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