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	(Requesto	r's Name)		
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PICK-UP] WAIT	MAIL	
	10.	F		
	(Business	Entity Name)	
	(Documen	t Number)		
Certified Copies		Certificates	of Status	_
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Special Instructions to	o Filing Off	icer:		
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SECRETARY OF STATE

M. aliela.

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

2/15/2022

NAME: 611 BAY ESPLANADE, LLC

TYPE OF FILING: ARTICLES

COST:

125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

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COVER LETTER

	ew Filing So ivision of Co	ection orporations			
SUBJECT	611 Bayl	Esplanade, LLC			
3000000	* <u></u>	Name o	f Limited Liab	ility Company	
The enclose	ed Articles o	of Organization and fee(s) are submitte	ed for filing.	
Please retur	m all corresp	ondence concerning thi	is matter to the	following:	
	Apostolos (Gionis			
			Name o	of Person	
	Gionis, Lill	ly & Romero, PLLC			
			Firm/C	ompany	
	1299 Main	Street, Ste C			
•			Add	Iress	
	Dunedin, F	L 34698			
'n	ogionis@gio	nislilly.com	City/State a	nd Zip Code	
<u> </u>		E-mail address: (to be u	used for future	annual report notifical	iion)
For further in	formation co	oncerning this matter, pl	lease call:		
1	Paul Gionis	at	727	446-3333	
-	Naл	ne of Person	Area Code	Daytime Telephor	ne Number
Enclosed is	a chack for t	the following amount:			
■\$125.00 I		□\$130.00 Filing Fe Certificate of Status	Certif	55.00 Filing Fee & fied Copy nal copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		ng Address		Street Address	
		filing Section on of Corporations		New Filing Section D The Centre of Tallah	
		on of Corporations Box 6327		2415 N. Monroe Stre	
		assee, FL 32314		Tallahassee, FL 3230	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED	. "
SECRETARY OF STATE	•
AUGUST OF COMPOSATION	ur-

ARTICLE I - Name:
The name of the Limited Liability Company is:

2022 FEB 15 PM 3: 00 1

611 Bay Esplanade, LLC		
(Must contain the words "L	imited Liability Company,	"L,L.C.," or "LLC.")
ARTICLE II - Address:		
The mailing address and street address of the prin	ncipal office of the Limited	Liability Company is:
Principal Office Addres	<u>\$5</u> :	Mailing Address:
1500 South 19th Street	1500	South 19th Street
Birmingham, AL 35025	Riem	ningham, AL 35025
ARTICLE III - Registered Agent, Registered ((The Limited Liability Company cannot serve as	Office, & Registered Agen	it's Signature:
ARTICLE III - Registered Agent, Registered ((The Limited Liability Company cannot serve as a another business entity with an active Florida reg	Office, & Registered Agentits own Registered Agent. Vistration.)	it's Signature:
ARTICLE III - Registered Agent, Registered ((The Limited Liability Company cannot serve as a another business entity with an active Florida reg The name and the Florida street address of the reg	Office, & Registered Agentits own Registered Agent. Vistration.)	it's Signature:
ARTICLE III - Registered Agent, Registered ((The Limited Liability Company cannot serve as a another business entity with an active Florida reg The name and the Florida street address of the reg	Office, & Registered Agent its own Registered Agent. Vistration.)	it's Signature:
ARTICLE III - Registered Agent, Registered ((The Limited Liability Company cannot serve as a another business entity with an active Florida reg The name and the Florida street address of the reg	Office, & Registered Agent its own Registered Agent. Vistration.) gistered agent are: & Romero, PLLC Name	it's Signature:
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as a another business entity with an active Florida reg The name and the Florida street address of the reg	Office, & Registered Agent its own Registered Agent. Vistration.) gistered agent are: & Romero, PLLC Name	nt's Signature: You must designate an individual or
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as a another business entity with an active Florida reg The name and the Florida street address of the reg	Office, & Registered Agent its own Registered Agent. Yeistration.) gistered agent are: & Romero, PLLC Name	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, 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..

(CONTINUED)

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Dennis Mark Clark
	1500 South 19th Street
	Birmingham, AL 35025
	2022
	
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(Use attachment if necessary)	
TICLE V: Effective date, if other than the	date of filing: (OPTIONAL)
TICLE V: Effective date, if other than the n effective date is listed, the date must b	date of filing:
FICLE V: Effective date, if other than the n effective date is listed, the date must b date of filing.)	e specific and cannot be more than five business days prior to or 90 days
TICLE V: Effective date, if other than the n effective date is listed, the date must b date of filing.) e: 1f the date inserted in this block does in the date of file date inserted in this block does in the date of file date inserted in this block does in the date in t	specific and cannot be more than five business days prior to or 90 days not meet the applicable statutory filing requirements, this date will not be list
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FICLE V: Effective date, if other than the n effective date is listed, the date must b date of filing.) e: If the date inserted in this block does in document's effective date on the Departm' TCLE VI: Other provisions, if any. REQUIRED SIGNATURE:	not meet the applicable statutory filing requirements, this date will not be listent of State's records.
FICLE V: Effective date, if other than the n effective date is listed, the date must b date of filing.) e: If the date inserted in this block does a document's effective date on the Department of the Departmen	not meet the applicable statutory filing requirements, this date will not be listent of State's records.
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CICLE V: Effective date, if other than the n effective date is listed, the date must be late of filing.) e: If the date inserted in this block does a document's effective date on the Departm TICLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a This document is explained and aware that any	not meet the applicable statutory filing requirements, this date will not be listent of State's records. All of the statutory filing requirements, this date will not be listent of State's records. The member of an authorized representative of a member. The statutes of the statutes o

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)

ARTICLE IV-