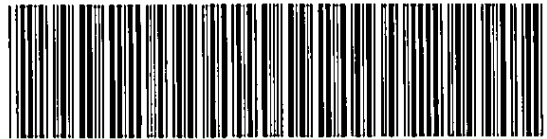


L22000065566



100381954091

02/18/22--01002--018 **125.00

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

RECEIVED
2022 FEB 17 PM 4:07
TALLAHASSEE, FLORIDA

FILED
2022 FEB 17 PM 2:27
SECRETARY OF STATE
TALLAHASSEE, FL

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: SAM DEVELOPERS 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:

STACY SMALL
Name of Person

SMITH THOMPSON SHAW
Firm/Company

3520 THOMASVILLE ROAD - 4TH FLOOR
Address

TALLAHASSEE, FL 32309
City/State and Zip Code

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

For further information concerning this matter, please call:

STACY SMALL 850 893-4105
Name of Person at () 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

ARTICLES OF ORGANIZATION
OF
SAM DEVELOPERS LLC

FILED
2022 FEB 17 PM 2:27
SECRETARY OF STATE
TALLAHASSEE, FL

The undersigned, pursuant to the provisions of Chapter 605 of the Florida Statutes (the "Florida Revised Limited Liability Company Act"), for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

1. **NAME.**

The name of the Limited Liability Company is **SAM DEVELOPERS LLC** (hereinafter referred to as the "Company").

2. **PERIOD OF DURATION.**

The period of duration of the Company shall be perpetual, unless it is dissolved as provided in the Florida Limited Liability Act or the written Operating Agreement to be executed by all of the Members of the Company.

3. **PURPOSE.**

To engage in any and all other businesses and activities permitted by the laws of the State of Florida. The Company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.

4. **MAILING ADDRESS OF BUSINESS.**

The mailing address of the business in Florida for the Company is **9287 Shoal Creek Drive, Tallahassee, Florida 32312**. Such address may be changed from time to time as provided in the Operating Agreement.

5. **ADDRESS OF PLACE OF BUSINESS.**

The address of the place of business is **9287 Shoal Creek Drive, Tallahassee, Florida 32312**. Such address may be changed from time to time as provided in the Operating Agreement.

6. **REGISTERED AGENT.**

The initial registered agent in Florida for the Company is: **Hassam F. Ameen**; the initial registered office is located at **9287 Shoal Creek Drive, Tallahassee, Florida 32312.**

7. **MANAGEMENT.**

The names and address of the persons authorized to manage and control the Limited Liability Company are as follows:

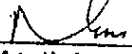
Manager: Hassam F. Ameen
9287 Shoal Creek Drive
Tallahassee, Florida 32312

Manager: Nabil Y. Atallah
5166 Holly Fern Trace
Tallahassee, Florida 32312

EXECUTED at Tallahassee, Leon County, Florida this 16 day of February, 2022.



Hassam F. Ameen



Nabil Y. Atallah

FILED
2022 FEB 17 PM 2:27
SECRETARY OF STATE
TALLAHASSEE, FL

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT WITH WHOM PROCESS MAY BE SERVED.

Pursuant to the provisions of Section 605 Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent. in the State of Florida.

1. The name of the limited liability company is **SAM DEVELOPERS LLC.**
2. The name of the registered agent and office is: **HASSAM F. AMEEN, 9287 Shoal Creek Drive, Tallahassee, Florida 32312.**

ACKNOWLEDGEMENT

Having been named to accept service of process for the above limited liability company, at the place designated in this certificate, I hereby accept to act in this capacity and agree to comply with the provision of said Act relative to being available at said location.


HASSAM F. AMEEN, REGISTERED AGENT