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(Re	equestor's Name)				
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PICK-UP	MAIT	MAIL			
(Business Entity Name)					
(Document Number)					
Certified Copies	Certificate:	s of Status			
Special Instructions to Filing Officer:					





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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

Art of Inc. File. LTD Partnership File. Foreign Corp. File LC. File. Fictitious Name File. Fictitious Name File. Trade/Service Mark. Merger File. Art. of Amend. File. RA Resignation. Dissolution / Withdrawal. Annual Report / Reinstatement. Cert. Copy. Photo Copy. Certificate of Fictitious Name. Cert. Good Standing. Certificate of Fictitious Name. Corp Record Search. Officer Search. Fictitious Search. Fictitious Search. Fictitious Search. Fictitious Search. Pictitious Owner Search. Vehicle Search. Driving Record. UCC 10 of 3 File. UCC 11 Search. UCC 11 Retrieval.				
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COVER LETTER

	New Filing Section of Cor						
SUBJEC	-	lopment, LLC					
Name of Limited Liability Company							
The enclo	sed Articles of	Organization and f	cc(s) arc	submitted	for filing.		
Please ret	um all correspo	ondence concerning	g this mat	iter to the f	ollowing:		
	Dana Whitne	ey .					
		<u> </u>		Name of	Person		
	The Grantha	m Law Firm					
		, <u>, , , , , , , , , , , , , , , , , , </u>		Firm/Co	npany		
	1860 Forest	Hill Blvd., Ste. 10.	5				
	Address						
	West Palm E	Beach, FL 33406					
	dana@kirkgra	antham com	Ci	ity/State an	d Zip Code		
			be used	for future a	nnual report notificati	on)	
For further	information co	ncerning this matte	r, please	call:			
	Dana Whitne	у	56 at (1	966-9563		
	Nam	e of Person			Daytime Telephone	e Number	
Enclosed	is a check for th	he following amou	nt:				
宣\$125.0	0 Filing Fee	☐\$130.00 Filing Certificate of St		Certifi	5.00 Filing Fee & ed Copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	New F Divisio	g Address iling Section on of Corporations ox 6327			Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stree	issee	

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				ED	
The name of the Limited Liability	Company is:			2027 1118 15 PM 3: 04	
LWB Development, L	.LC				
(Must conta	in the words "Limited Li	ability Compa	ny, "LL.C.," or "LLC.")	A LAHASSEE, FL	
ARTICLE II - Address: The mailing address and street ad	dress of the principal off	ice of the Lim	ited Liability Company is:		
<u>Principa</u>	l Office Address:		Mailing Addre	<u>ss</u> :	
924 South Lakeside E Lake Worth Beach, F			224 South Lakeside Drive Lake Worth Beach, FL 33460		
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own R	legistered Age	gent's Signature: nt. You must designate an indi	vidual or	
The name and the Florida street a	ddress of the registered a	igent are:			
	Eric Yeghian	_			
		Name			
	924 South Lakeside D	rive _			
	Florida street address				
	Lake Worth Beach	FL	33460		
	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..

(CONTINUED)

Registered Agent Signature (REQUIRED)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager Eric Yeghian MGR 924 South Lakeside Drive Lake Worth, FL 33460 (Use attachment if necessary) . (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: _ (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. **REOUIRED SIGNATURE:**

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.

Eric Yeghian

Typed or printed name of signee

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)