

L22000114849

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.

((H22000095722 3))



H220000957223ABC1

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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : RABIDEAU KLEIN
Account Number : 120200000035
Phone : (561)655-6221
Fax Number : (561)655-3221

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

Email Address: grabindeau@rabideauklein.com

FLORIDA LIMITED LIABILITY CO.
FLA Holdings LLC

Certificate of Status	1
Certified Copy	1
Page Count	05
Estimated Charge	\$160.00

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FLORIDA DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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Electronic Filing Menu Corporate Filing Menu

Help



March 15, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

RABIDEAU KLEIN

SUBJECT: FLA HOLDINGS, LLC
REF: W22000033584

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The document needs the complete principal address and mailing address. The manager's address also needs to be completed with a complete legal address.

If you have any further questions concerning your document, please call (850) 245-6052.

Summer Chatham
Regulatory Specialist II
New Filing Section

FAX Aud. #: H22000095722
Letter Number: 522A00006092

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* * * Communication Result Report (Mar. 21. 2022 10:53AM) * * *

1}

Date/Time: Mar. 21. 2022 10:51AM

File No. Mode	Destination	Pg(s)	Result	Page Not Sent
1492 Memory TX	8506176381	P. 8	OK	

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P. 1

* * * Communication Result Report (Mar. 15. 2022 11:42AM) * * *

3}

Date/Time: Mar. 15. 2022 11:42AM

File No. Mode	Destination	Pg(s)	Result	Page Not Sent
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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: FLA Holdings, 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:

Guy Rabideau

Name of Person

Rabideau Klein

Firm/Company

440 Royal Palm Way, Ste 101

Address

Palm Beach, FL 33480

City/State and Zip Code

grabideau@rabideauklein.com

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Guy Rabideau 561 655-6221
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 FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

FLA Holdings, 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:

695 Charles River Street

Needham, MA 02492

695 Charles River Street

Needham, MA 02492

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:

Guy Rabideau

Name

440 Royal Palm Way, Ste 101

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

Palm Beach

Florida

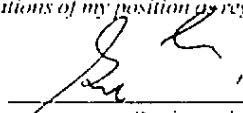
33480

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.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

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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

Sole Manager

Steven Sands

695 Charles River Street

Needham, MA 02492

(Use attachment if necessary)

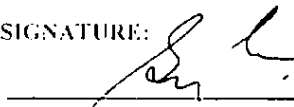
ARTICLE V: Effective date, if other than the date of filing: _____, (OPTIONAL)

(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.

REQUIRED 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.

Guy Rabideau

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)

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