

# L220000138955

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

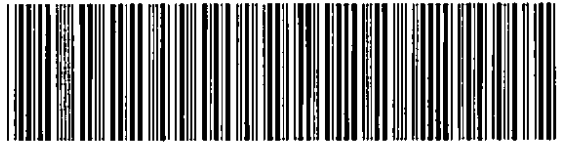
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



300384277433

04/05/22--01001--010 \*\*125.00

**FILED**

2022 APR -4 AM 11:12

SECRETARY OF STATE  
TALLAHASSEE, FL

**RECEIVED**

2022 APR -4 PM 4:48

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

## Advanced Incorporating Service

1317 California Street  
P.O. Box 20396  
Tallahassee, FL 32316

Phone: 850-222-CORP  
Fax: 850-575-2724  
Email: [wlopez@aisincfl.com](mailto:wlopez@aisincfl.com)  
Website: [www.aisincfl.com](http://www.aisincfl.com)

NAME OF ENTITY <u>Moontide III, LLC</u>	FOR OFFICE USE ONLY

### PICK ONE:

☐ CERTIFIED COPY ☒ PHOTOCOPY ☐ C.U.S.

### FILING:

☐ CORPORATION ☒ LLC ☐ LIMITED PARTNERSHIP ☐ GENERAL PARTNERSHIP  
☐ FICTITIOUS NAME ☐ SERVICEMARK/TRADEMARK ☐ AMENDMENT  
☐ FOREIGN QUALIFICATION ☐ JUDGMENT LIEN  
☐ OTHER \_\_\_\_\_

### RETRIEVAL:

☐ GOOD STANDING CERT/C.U.S. ☐ CERTIFIED COPY ☐ PHOTOCOPY  
Of \_\_\_\_\_

### APOSTILLE/NOTARY CERTIFICATION REQUEST:

Country \_\_\_\_\_

Amount of Documents \_\_\_\_\_

DATE 4/4/22 TIME \_\_\_\_\_

Notes: \_\_\_\_\_

# ARTICLES OF ORGANIZATION FOR

## Moontide III, LLC

**FILED**  
2022 APR -4 AM 11:12  
SECRETARY OF STATE  
TALLAHASSEE, FL

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Act, Chapter 605, hereby adopts the following Articles of Organization.

### ARTICLE I: NAME

The name of the company is **Moontide III, LLC**

### ARTICLE II: PRINCIPAL AND MAILING ADDRESS

The principal office and mailing address of the company is **2 Commonwealth Avenue, Unit 8G, Boston, MA 02116.**

### ARTICLE III: MANAGERS AND MEMBERS

The name and address of the initial Manager and Authorized Member of the company are:

**Dolores P. Martin, Manager, 2 Commonwealth Avenue, Unit 8G, Boston, MA 02116**


**Totten Pond, LLC, Authorized Member, 2 Commonwealth Avenue, Unit 8G, Boston, MA 02116**

## **ARTICLE IV: REGISTERED AGENT AND ADDRESS**

The name and address of the initial Registered Agent of the company is **Block & Scarpa, 601 21<sup>st</sup> Street, Suite 401, Vero Beach, FL 32960.**

The undersigned has executed these Articles of Organization this 4<sup>th</sup> day of April 2022.

"Advanced Filing and Retrieval Services, Inc. by, Weimar Lopez,  
Client Representative"

A handwritten signature in black ink, appearing to read 'Weimar Lopez', is written over a horizontal line.

Authorized Representative

## **CERTIFICATE DESIGNATING REGISTERED AGENT AND REGISTERED OFFICE**

Pursuant to the provisions of section 605.0113, Florida Statutes, the  
aforementioned company, organized under the laws of the State of  
Florida, submits the following statement designating the Registered  
Agent and Registered Office, in the State of Florida.

**Name of the limited liability company:**

Moontide III, LLC

**Name and address of the Registered Agent and Registered  
Office:**

Block & Scarpa

601 21<sup>st</sup> Street, Suite 401, Vero Beach, FL 32960

Having been named Registered Agent and to accept Service of  
Process for the aforementioned company at the designated  
place in this certificate, I hereby accept the appointment and  
agree to act in its capacity, I further agree, am familiar with and  
accept the obligations of my position as Registered Agent as  
provided for in Chapter 605, Florida Statutes.

/s/: M.K. Clem, Esq.  
for Block and Scarpa

**FILED**

**2022 APR -4 AM 11:12**

**SECRETARY OF STATE  
TALLAHASSEE, FL**