

L22000144778

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

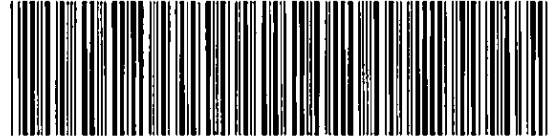
(Business Entity Name)

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STATE OF FLORIDA
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STATE OF FLORIDA
TALLAHASSEE, FL

CAPITAL CONNECTION, INC.

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

FT BOCA, LLC

Signature _____

Requested by: SETH

Name _____ Date _____ Time _____

Walk-In _____ Will Pick Up _____

_____ Art of Inc. File _____
_____ LTD Partnership File _____
_____ Foreign Corp. File _____
_____ L.C. 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 Good Standing _____
_____ Certificate of Status _____
_____ Certificate of Fictitious Name _____
_____ Corp Record Search _____
_____ Officer Search _____
_____ Fictitious Search _____
_____ Fictitious Owner Search _____
_____ Vehicle Search _____
_____ Driving Record _____
_____ UCC 1 or 3 File _____
_____ UCC 11 Search _____
_____ UCC 11 Retrieval _____
_____ Courier _____

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**SECRETARY OF STATE
TALLAHASSEE, FL**

ARTICLES OF ORGANIZATION FOR

FT BOCA, LLC

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

ARTICLE I: NAME

The name of the company is **FT BOCA, LLC**

ARTICLE II: PRINCIPAL OFFICE

The principal office of the company is **3050 K STREET NW, SUITE 301, WASHINGTON, D.C.
20007**

ARTICLE III: INITIAL REGISTERED AGENT AND ADDRESS

The name and address of the initial registered agent is **Angelo & Banta, P.A. 515 E. Las Olas Boulevard, Suite 850, Fort Lauderdale, FL 33301**

ARTICLE IV: MANAGEMENT

The name and address of each initial person authorized to manage and control the Limited Liability Company:

**FABIO TRABOCCHI, AUTHORIZED MEMBER, 3050 K STREET NW, SUITE 301,
WASHINGTON, D.C. 20007**

The undersigned has executed these Articles of Organization for filing purposes this 4th day of April 2022.

/S/ FABIO TRABOCCHI

Authorized Representative

CERTIFICATE OF DESIGNATION

REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of the Florida Statutes, the mentioned 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 company is: **FT BOCA, LLC**
2. The name and street address of the registered agent and office is:

**Angelo & Banta, P.A.
515 E. Las Olas Boulevard, Suite 850
Fort Lauderdale
FL 33301**

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SECRETARY OF STATE
TALLAHASSEE, FL

HAVE BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE STATED 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.

/S/ THOMAS P. ANGELO

Thomas P. Angelo for Angelo & Banta, P.A.