# 22000147658

(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



400384757254

2022 APR -7 PM 4: 39

RECEIVED

## Incorporating Services, Ltd.

incserv 1540 Glenway Drive

Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

# **ORDER FORM**

Florida Department of State

The Centre of Tallahassee 2415 North Monroe Street, Suite 810 Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

FROM

Melissa Moreau

mmoreau@incserv.com

850.656.7953

REQUEST DATE 4/7/2022

**PRIORITY** Regular Approval

OUR REF\_#\_(Order\_ID#)] 1024543

ORDER ENTITY

TIP OF THE SPEAR FUND 1 LLC

PLEASE PERFORM THE FOLLOWIN	IG SERVICES:
TIP OF THE SPEAR FUND 1 LLC	

New LLC filing

NOTES:

\$125.00 Authorized

Email address for annual report reminders: gwilkes@krtaxes.com

### RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and couner package if applicable. For UCC orders, please include the thru date on the results.

Thursday, April 7, 2022 Page 1 of 1

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED FJABILITY COMPANY

FILED

4 1				•	
	K I	 LE I	_		me:

The name of the Limited Liability Company is:

2022 APR -7 PM 4: 40

		ZUZZ ALIV - 1 FIT 4		
TIP OF THE SPEAR FUND I LLC		QCDLL SOUND C		
(Must contain the words "Limited Li	ability Con	SECHE (ARY OF S		
ARTICLE II - Address: The mailing address and street address of the principal off	ice of the L	Limited Liability Company is:		
Principal Office Address:		Mailing Address:		
7901 4th St N STE 300		2853 S. Sossaman Rd STE A-101 Mesa AZ 85212		
St. Petersburg FL 33702	<u> </u>			
The name and the Florida street address of the registered a  Registered Age	ents Inc	<u>.                                    </u>		
Registered Age	ents Inc	D		
	Name	TE 000		
<u>7901 4th S</u>				
Florida street address (	(P.O. Box <u>2</u>	NOT acceptable)		
St. Petersburg	FL	33702		
City	State	Zip		
wing been named as registered agent and to accept service ace designated in this certificate. I hereby accept the appoint the appoint the appoint the appoint the appoint the agree to comply with the provisions of all statutes related in familiar with and accept the obligations of my position as	intment as reating to the $_i$	egistered agent and agree to act in this capacity. I proper and complete performance of my duties, and		
Register	ed Agent's	Signature (REQUIRED)		

(CONTINUED)

### ARTICLE IV-

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

"MGR" = Manager	Name and Address:	
MOR Manager		
Manager	DREI PARTNERSHIP MANAGER LLC	
	2853 S Sossaman Rd STE A-101	
	Mosu AZ 85212	
MANAGER	KPEI PARTNERSHIP MANAGER LLC	
	2853 S Sossaman Rd STE A-101	
	Mesa, AZ., 85212	
	TAC 2	77
		۱ " تتوی
		7
		T
	SSE SE	1 0
		7
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the of	date of filing: (OPTIONAL)	
If an effective date is listed, the date must be he date of filing.)	not meet the applicable statutory filing requirements, this date will not be list	

# CARLY DACOSTA

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)