L22000148930

(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



400385139214

ZULL APR -7 AM II: 33

22 APC -7 PM 3:30

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

ACCOUNT NO. : 12000000195
REFERENCE : 602707 86218A
AUTHORIZATION : Signal of
COST LIMIT : \$ 125'.00
ORDER DATE : April 7, 2022
ORDER TIME : 2:58 PM
ORDER NO. : 602707-005
CUSTOMER NO: 86218A
DOMESTIC FILING
NAME: ADANA PROPERTIES LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
CERTIFIED COPY
XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Alexxis Weiland - EXT.
EXAMINER'S INITIALS:

COVER LETTER

TO:	New Filing Sec Division of Co					
SUBJEC	Adana Pro	perties LLC				
55-0-0		Name o	f Limited Liabi	lity Company		
The encl	osed Articles of	Organization and fee(s) are submitte	l for filing.		
Please re	turn all correspo	ondence concerning th	is matter to the	following:		
	John D. Bali	ian				
			Name o	f Person		
			Firm/C	ompany		
	2000 North Ocean Blvd, Unit 606					
			Add	ress		
	Boca Raton,	, FL 33431				
	johndbalian@	Nama:1	City/State a	nd Zip Code		
			used for future	annual report notificati	on)	
For furthe	r information co	oncerning this matter, p	lease call:	·		
	John D. Bali		609	529-4079		
	Nan	ne of Person	Area Code	Daytime Telephon	e Number	
E-alassa.	lia a abaala faas	he fellowing amount:				
	1 is a check for t	he following amount: \$130.00 Filing For Certificate of Statu	s Certif	55.00 Filing Fee & fied Copy nal 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 Di The Centre of Tallaha 2415 N. Monroe Stre Tallahassee, FL 3230	assee et, Suite 810	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liab	oility Company is:					
Adana Properties			. <u> </u>			
(Must c	onatin the words "Limited L	iability Company, "l	L.L.C.," or "LLC.")			
ARTICLE II - Address:						
The mailing address and stree	et address of the principal of	fice of the Limited L	ishility Company is:			
THE HABING GOLIOSO ME SOC	rade os or the principal of	nee of the Elitated E	natification of the state of th			
<u>Prin</u>	Principal Office Address:		Mailing Address:			
2000 North Ocea	n Blvd, Unit 606	2000	2000 North Ocean Blvd, Unit 606			
Boca Raton, FL 3			Boca Raton, FL 33431			
	-					
ARTICLE III - Registered .	Agent, Registered Office, &	& Registered Agent	's Signature:			
The Limited Liability Comp	any cannot serve as its own l	Registered Agent. You	's Signature: ou must designate an individual or			
The Limited Liability Comp	any cannot serve as its own l	Registered Agent. You	's Signature: ou must designate an individual or			
The Limited Liability Comp another business entity with	any cannot serve as its own l an active Florida registration	Registered Agent. You	's Signature: ou must designate an individual or			
The Limited Liability Comp another business entity with	any cannot serve as its own l an active Florida registration	Registered Agent. You	's Signature: ou must designate an individual or			
(The Limited Liability Comp another business entity with	any cannot serve as its own l an active Florida registration	Registered Agent. You	's Signature: ou must designate an individual or			
(The Limited Liability Comp another business entity with	any cannot serve as its own land active Florida registration cet address of the registered	Registered Agent. You	's Signature: ou must designate an individual or			
ARTICLE III - Registered and Company of the Limited Liability Companother business entity with the name and the Florida straight	any cannot serve as its own land active Florida registration cet address of the registered	Registered Agent. You L) agent are: Name	's Signature: ou must designate an individual or			
(The Limited Liability Comp another business entity with	any cannot serve as its own lan active Florida registration eet address of the registered John D. Balian	Registered Agent. You,) agent are: Name vd. Unit 606	ou must designate an individual or			
(The Limited Liability Comp another business entity with	any cannot serve as its own an active Florida registration cet address of the registered John D. Balian 2000 North Ocean Bl	Registered Agent. You,) agent are: Name vd. Unit 606	ou must designate an individual or			

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 agregistered agent as provided for in Chapter 605, F.S..

John D. Balian

(CONTINUED)



<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	John D. Balian 2000 North Ocean Blyd, Unit 606 Boca Raton, FL 33431
(Use attachment if necessary)	
If an effective date is listed, the date must be s he date of filing.)	te of filing:
ARTICLE VI: Other provisions, if any.	i of Sale Siecolus.
REQUIRED SIGNATURE:	La Belin, m
This document is expo I am aware that any lal	nember or an authorized representative of a member. Stated in accordance with section 605.0203 (1) (b), Florida Statutes. Use information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S.
John D. Balian	Typed or printed name of signee

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

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)

ARTICLE IV-