L22000/62828

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Bosiness Emily Name)
(Document Number)
(Document Number)
Outforce of Other
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



800385351938

2022 APR 18 AM 10: 23

2022 API, 18 PH 3: 24

as what

Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : 12000000195 REFERENCE: 620799 7468566 AUTHORIZATION : COST LIMIT : ORDER DATE: April 13, 2022 ORDER TIME : 1:58 PM ORDER NO. : 620799-005 CUSTOMER NO: 7468566 DOMESTIC FILING NAME: STEFANOU LAW, PLLC EFFECTIVE DATE: __ ARTICLES OF INCORPORATION __ CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: __ CERTIFIED COPY

EXAMINER'S INITIALS:

CORPORATION SERVICE COMPANY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland - EXT.

1201 Hays Street

COVER LETTER

	w Filing Section vision of Corporations		
SUBJECT	·	Law, PLLC	<u>=</u>
The enclose	ed Articles of Organization and fee(s) a	are submitted for filing.	
Please retur	m all correspondence concerning this r	natter to the following:	
	Anastas	Name of Person	<u> </u>
		Firm/Company	
	1845 Mall	ard Lane	
-		City/State and Zip Code TSia @ a Stef ed for future annual report notification	
For further in	nformation concerning this matter, plea	ase call:	
Anæl	Name of Person	Area Code Daytime Telephone	0842 Number
	Filing Fee Certificate of Status	& \$\Bigcup \text{S155.00 Filing Fee & Certified Copy (additional copy is enclosed)}	☐S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327	Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Street	issee

Tallahassee, FL 32314

Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

ARTICLE I - Name:

The name of the Limited Liability Company is:

2022 APR 18 AM 10: 23

Hefanou Law, PLLC (Must conatin the words "Limited Liability Company, "L.L

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

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:

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

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.. Corporation Service Company

Régistered Agent's Signature (REQUIRED)

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
Anastosia Sefance, authorizad member	<u> </u>	3003 808 180
(Use attachment if necessary)		MH 10: 23
(If an effective date is listed, the date must be spetthe date of filing.)	ecific and cannot be more than five business days prior to or 90 da neet the applicable statutory filing requirements, this date will not be	
	ctivities legally permitted in the	<u>:ra</u> te
This document is execut I am aware that any false	mber or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State efelony as provided for in s.817.155, F.S. Typed or printed name of signee	

Filing Fees:
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

ARTICLE IV-

\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)