

L22000164624

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

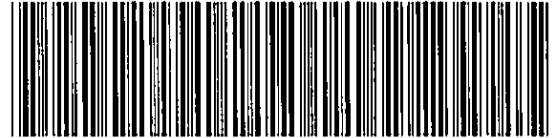
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700386093467

04/19/22--01007--016 **125.00

FILED

2022 APR 19 AM 11:35

SEC. OF STATE
TALLAHASSEE, FL

2022 APR 19 PM 2:23

CAPITAL CONNECTION, INC.

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

JACOB AND RACHEL PLAZA LLC

Signature _____

Requested by: _____

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 _____

FILED

**ARTICLES OF ORGANIZATION
OF
JACOB AND RACHEL PLAZA LLC**

2022 APR 19 AM 11:35

**SECRETARY OF STATE
TALLAHASSEE, FL**

The undersigned does hereby subscribe to, acknowledge and file the following Articles of Organization for the purpose of creating a limited liability company under the laws of the State of Florida.

ARTICLE I - NAME

The name of this limited liability company shall be
JACOB AND RACHEL PLAZA LLC

ARTICLE II – BUSINESS PURPOSE

The Company shall be authorized to transact any lawful business in the State of Florida or in the United States, including, but not limited to a operation of a real estate investment business.

ARTICLE III – PRINCIPAL OFFICE

The mailing address and street address of the principal office of the limited liability company shall be 3701 Ottawa Lane, Cooper City, Florida 33026.

ARTICLE IV – REGISTERED OFFICE

The initial registered office of this limited liability company is 10081 Pines Blvd., Ste. C, Pembroke Pines, Florida 33024 The initial registered agent at that address is Arnold M. Straus, Jr.

ARTICLE V - MANAGEMENT

The limited liability company shall be manager-managed. There shall always be one manager. The initial Manager is:

Rachel Sarkhovitch
3701 Ottawa Lane
Cooper City, Florida 33026

ARTICLE VI – EFFECTIVE DATE

This limited liability company shall commence its existence as of the filing of these Articles of Organization, and shall exist perpetually thereafter unless sooner dissolved.

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization on the 4.12.2022 of April 2022.



RACHEL SARKHOVITCH, Manager

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provision of section 605, Florida Statutes, the limited liability company referenced below submits the following statement in designating the registered office/registered agent, in the State of Florida.

FIRST – The name of the limited liability company is

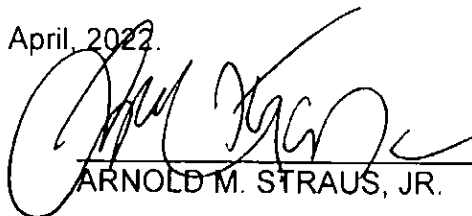
JACOB AND RACHEL PLAZA LLC

SECOND – The name and address of the registered agent and office is:

ARNOLD M. STRAUS, JR.
10081 PINES BLVD., STE. C
PEMBROKE PINES, FLORIDA 33024

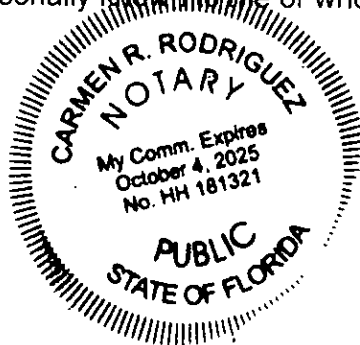
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provision of all 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.

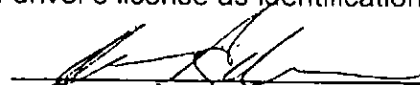
Dated as of this 19 day of April, 2022.


ARNOLD M. STRAUS, JR.

STATE OF FLORIDA)
 SS:
COUNTY OF BROWARD)

The foregoing instrument was acknowledged before me this 19th day of April, 2022, by means of physical presence by Arnold M. Straus, Jr., Esq., who is personally known to me or who produced driver's license as identification.




NOTARY PUBLIC, State of Florida
My Commission Expires:

FILED
2022 APR 19 AM 11:35
NOTARY PUBLIC
CARMEN R. RODRIGUEZ