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3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

D	ate: 04/22/2022	
	Acc#120160000072	
Name:	7700 ORANGE LLC	_
Document #:		
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Thank you!

COVER LETTER

	ew Filing Sectivision of Con					
SUBJECT	7700 ORA	NGE LLC				
SOBJECT	•	Nar	ne of Lim	ited Liabili	ty Company	
The enclose	ed Articles of	Organization and	fee(s) are	submitted	for filing.	
Please retur	rn all correspo	ondence concernin	g this mat	tter to the f	ollowing:	
	PAM SPAD	ARO				
				Name of	Person	<u> </u>
	BANK OF A	AMERICA, N.A.				
				Firm/Co	mpany	_
	301 Comme	rce Street, Suite 2	400			
				Addre	ess	
	Fort Worth,	Texas 76102				
	11	OD 64	Ci	ty/State and	d Zip Code	
-		ro@BofA.com E-mail address: (to	be used t	for future a	nnual report notificati	ion)
For further in		ncerning this matt			,	,
	Pam Spadaro	-		14)	209-1681	
-	Nam	e of Person		ea Code	Daytime Telephon	e Number
Enclosed is	a check for t	he following amou	int:			
□\$125.00	Filing Fee	■\$130.00 Filir Certificate of S		Certifie	5.00 Filing Fee & ed Copy al copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		g Address			Street Address	
		iling Section on of Corporations			New Filing Section Di The Centre of Tallaha	
		ox 6327	1		2415 N. Monroe Stre	
		assee, FL 32314			Tallahassee, FL 3230	3

AKTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

4	RT	CL	Ŀ	ſ _	N.	mo	

The name of the Limited Liability Company is:

2022 APR 22 AM 11: 43

7700	OR	AN	CE	LLC
1/00	O1.		~	

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

SECNETALL OF STATE TALLAHASSEE, FL

The mailing address and stre	et address of the principal o	office of the Limited L	Liability Company is:		
<u>Prin</u>	ncipal Office Address:		Mailing Address:		
901 Main Street, 16th Floor			901 Main Street, 16th Floor		
Dallas, Texas 75	5202	Dalla	s, Texas 75202		
another business entity with	•		ou must designate an individual or		
•	reet address of the registered	d agent are:			
•	•	d agent are:			
•	reet address of the registered	d agent are: stem Name	•		
•	C T Corporation Sys	d agent are: stem Name	ceptable)		
The name and the Florida str	C T Corporation Sys	d agent are: stem Name and Road	ceptable)		

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..

C T Corporation System	/s/ David Westcolt, Assistant Secretary
By: Registered Agent's	Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title: "AMBR" = Author		
"MGR" = Manager <u>AMBR</u>	Jack Klein Survivor's Trust Under the JEK Revocable Trust 901 Main Street, 16th Floor Dallas, Texas 75202	
	ZWZZ APR ZW TALLAH	T
(Use attachment if r	ASSE ASSE TO SEE	Ti O
ARTICLE V: Effective date. If an effective date is listed, he date of filing.) Note: If the date inserted in	t, if other than the date of filing: Date of filing (OPTIONAL), the date must be specific and cannot be more than five business days prior to or 90 days afor this block does not meet the applicable statutory filing requirements, this date will not be listed to on the Department of State's records.	
NRTICLE VI: Other provision	·	
REQUIRED SIGN	NATURE: Co Ca	
I ar	Signature of a member or an authorized representative of a member. is document is executed in accordance with section 605.0203 (1) (b), Florida Statutes, m aware that any false information submitted in a document to the Department of State astitutes a third degree felony as provided for in s.817.155, F.S.	
	Craig B. Anderson 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)