

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H22000156323 3)))



H220001563233ABCV

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
 Fax Number : (850)617-6381

From:

Account Name : COHEN, NORRIS, WOLMER, RAY, TELEPMAN & COHEN
 Account Number : I20020000140
 Phone : (561)844-3600
 Fax Number : (561)842-4104

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: KD @ CohenNorris.Com

FLORIDA DEPARTMENT OF STATE
 TALLAHASSEE, FLORIDA

2022 APR 29 AM 8:30

FILED

RECEIVED

2022 APR 29 PM 4:01

FLORIDA DEPARTMENT OF STATE
 DIVISION OF CORPORATIONS
 TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.
FLORIDA BLISS INVESTMENTS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

FI ~ ~ 000 156 323 3

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: FLORIDA BLISS INVESTMENTS, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fcc(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Peter R. Ray, Esq.

Name of Person

Cohen Norris Wolmer Ray Telepman Berkowitz Cohen

Firm/Company

712 U.S. Highway One, Suite 400

Address

North Palm Beach, FL 33408

City/State and Zip Code

MILES072292@GMAIL.COM

E-mail address: (to be used for future annual report notification)

OFFICE OF THE
CLERK OF THE
TALLAHASSEE, FLORIDA

2022 APR 29 AM 8:30

FILED

For further information concerning this matter, please call:

Karin Drakas 561 844-3600
Name of Person at () Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$125.00 Filing Fee ☒ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional 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 Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

H2200013 62127

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

FLORIDA BLISS INVESTMENTS, LLC

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

ARTICLE II - Address:

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

Principal Office Address:Mailing Address:235 SUNRISE AVENUE3345 S. FEDERAL HIGHWAYUNIT 3215UNIT HPALM BEACH, FL 33480BOYNTON BEACH, FL 33435

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:

Cohen Norris Wolmer Ray Telepman Berkowitz Cohen

Name

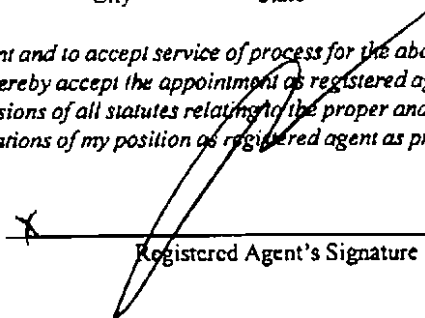
712 U.S. Highway One, Suite 400Florida street address (P.O. Box **NOT** acceptable)North Palm BeachFL33408

City

State

Zip

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.



X Registered Agent's Signature (REQUIRED)

(CONTINUED)

 2022 APR 29 AM 8:30
 CLERK OF STATE
 TALLAHASSEE, FLORIDA

FILED

H220001563233

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

MGR _____

MILES SERMAN
 3345 S. FEDERAL HIGHWAY, UNIT H
 BOYNTON BEACH, FL 33435

MGR _____

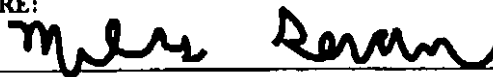
LAUREN SERMAN
 3345 S. FEDERAL HIGHWAY, UNIT H
 BOYNTON BEACH, FL 33435

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)
 (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

REQUIRED SIGNATURE:


Signature of a member or an authorized representative of a member.
 This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
 I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

MILES SERMAN

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)

STATE DEPT OF STATE
 ALI AHASSE, FLORIDA

2022 APR 29 AM 8:30

FILED