

5/11/22, 12:48 PM

Division of Corporations

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Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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

S. CHATHAM

From: Account Name : USACORP INC.
Account Number : I20130000019
Phone : (718)362-4789
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MAY 12 2022

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

Email Address: sarah@jlservicegroup.com

RECEIVED
2022 MAY 11 PM 1:30
CORPORATIONS
COMMERCIAL
SERVICES

FLORIDA LIMITED LIABILITY CO.
1116 NE 4TH CT Property LLC

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

22 MAY 11 AM 3:49
DIVISION OF CORPORATIONS

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY.

ARTICLE I - Name:

The name of the Limited Liability Company is:

1116 NE 4TH CT Property LLC
(Must end with 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:

1116 NE 4th Ct.
Hallandale Beach, FL 33009

1116 NE 4th Ct.
Hallandale Beach, FL 33009

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:

Joel Fish
Name

1116 NE 4th Ct.
Florida street address (P.O. Box NOT acceptable)

Hallandale Beach FL 33009
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.

/s/ Joel Fish
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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REGISTRATION DIVISION

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ARTICLE IV-

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

Title:
"AMBR" = Authorized Member
"MGR" = Manager
"AMBR"

Name and Address:
Joel Fish
1116 NE 4th Ct.
Hallandale Beach, FL 33009

(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:

/s/ Joel Fish

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.

Joel Fish

Typed or printed name of signer

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)

22 MAY 11 AM 3:50
DIVISION OF CORPORATE & ORGANIZATION SERVICES

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