# L22000 194197

	questor's Name)	
(Re	questoi s ivame)	
*****		
(Adı	dress)	
(Adı	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu:	siness Entity Nar	ne)
·	·	·
- (Do	cument Number)	
(55	ournoise riumoci,	
Cadified Casina	Carificato	f C+-+
Certified Copies	Certificates	s or States
Special Instructions to	Filing Officer:	





900387226759

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RECEIVED



## FLORIDA FILING & SEARCH SERVICES, INC.

# P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

05/12/22

NAME: 2328 VINTAGE LLC

TYPE OF FILING: ARTICLES

COST: 125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

### COVER LETTER

	Sew Filing Sec Division of Co				
SUBJECT	2328 Vinta				
SUBJECT	Γ:		ne of Limited Li	ability Company	<del></del>
The enclos	sed Articles of	Organization and	fee(s) are submi	tted for filing.	
Please retu	ırn all corresp	ondence concernin	g this matter to t	he following:	
	Joseph A. Y	olofsky, Esq.			
	-		Nam	e of Person	<del></del>
	Yolofsky La	iw, P.A.			
	<del></del>		Firm	/Company	
	100 SE 3rd	Ave, Suite 1000			
			A	ddress	<del> </del>
	Fort Lauder	dale, FL 33394			
	ajy@yolofsky	vlaw.com	City/State	e and Zip Code	
			be used for futu	re annual report notifica	ation)
For further	information co	oncerning this matte	er, please call:		
	Joseph Yolo	fsky	954 at (	237-4011	
	Nan	ne of Person	Area Cod	e Daytime Telepho	one Number
Enclosed i	is a check for t	he following amou	int:		
	9 Filing Fee	□\$130.00 Filin Certificate of S	ig Fee & □! tatus Ce	\$155.00 Filing Fee & rtified Copy is enclosed)	☐\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisi P.O. E	ng Address Filing Section on of Corporations Box 6327 Jassee, FL 32314	í	Street Address New Filing Section The Centre of Talla 2415 N. Monroe St Tallahassee, FL 327	hassee reet, Suite 810

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2328 Vintage LLC			
(Must con	tain the words "Limited I	Liability Company, "I	L.E.C.," or "LEC.")
ARTICLE II - Address:			
The mailing address and street a	address of the principal of	Tice of the Limited L	Liability Company is:
<u>Princi</u>	pal Office Address:		Mailing Address:
100 SE 3rd Ave, Su	ite 1000	Same	
Fort Lauderdale, FL	. 33394	<del></del> -	
	<del></del>	<del></del>	·
(The Limited Liability Compan another business entity with an	y cannot serve as its own active Florida registration	Registered Agent. Yon.)	's Signature: ou must designate an individual or
(The Limited Liability Compan another business entity with an	y cannot serve as its own active Florida registration	Registered Agent. Yon.)	
ARTICLE III - Registered Ag (The Limited Liability Compan another business entity with an The name and the Florida street	y cannot serve as its own active Florida registration address of the registered	Registered Agent. Yon.)	
(The Limited Liability Compan another business entity with an	y cannot serve as its own active Florida registration address of the registered	Registered Agent. Yon.) agent are: Name	
(The Limited Liability Compan another business entity with an	y cannot serve as its own active Florida registration address of the registered Yolofsky Law, P.A.	Registered Agent. Youn.) agent are: Name	ou must designate an individual or
(The Limited Liability Compan another business entity with an	y cannot serve as its own active Florida registration address of the registered Yolofsky Law, P.A.  100 SE 3rd Ave., Sui	Registered Agent. Youn.) agent are: Name	ou must designate an individual or
(The Limited Liability Compan another business entity with an	y cannot serve as its own active Florida registration address of the registered Yolofsky Law, P.A.  100 SE 3rd Ave., Sui Florida street address	Registered Agent. Yound agent are:  Name to 1000  (P.O. Box NOT acc	ou must designate an individual or

(CONTINUED)

Registeredangemein Signature (REQUIRED)



ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Chaim Meyer Trust
	100 SE 3rd Ave, Suite 1000 Fort Lauderdale, FL 33394
	For Education, FE 33374
· · · · · · · · · · · · · · · · · · ·	<del></del>
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the da	nte of filing: (OPTIONAL)
II an effective date is listed, the date must be a he date of filing.)	specific and cannot be more than five business days prior to or 90 days after
	t meet the applicable statutory filing requirements, this date will not be listed as
he document's effective date on the Departme	
ne document serietive date on the 12epartite	in or state s records.
RTICLE VI: Other provisions, if any.	
	Little - A
REQUIRED SIGNATURE:	
	一 Docu Signed by:
	a. J. Yolofsky
Signature of a	memmer of a member.
This document is exec	cuted in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any fa	Ise information submitted in a document to the Department of State
constitutes a third deg	ree felony as provided for in s.817.155, F.S.
Insenh Volofel	ky as attorney-in-fact
yoseph Toldisi	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)

