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((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:	
		•





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KECEIVED

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE: 677360 7699155 AUTHORIZATION : COST LIMIT : ORDER DATE: May 16, 2022 ORDER TIME : 2:03 PM ORDER NO. : 677360-005 CUSTOMER NO: 7699155 _______ DOMESTIC FILING NAME: RED HOOK CONTRACTORS LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION _ CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Alexxis Weiland - EXT.

EXAMINER'S INITIALS:

COVER LETTER

	New Filing Sec Division of Co				
SUBJECT		Contractors LLC			
300300	· -	Nam	e of Limited Lia	bility Company	
The enclos	sed Articles of	Organization and f	ee(s) are submit	ted for filing.	
Please retu	urn all correspo	ondence concerning	this matter to th	e following:	
	Francesca C	agliostro			
			Name	of Person	
	Pashman Sto	ein Walder Hayden	, P.C.		
		-	Firm/	Сотрапу	
	Court Plaza	South, 21 Main Str	eet, Suite 200		
			Ac	Idress	
	Hackensack	, NJ 07601			
	for all patro (i)	and manatain nam	City/State	and Zip Code	
		eashmanstein.com E-mail address: (to	be used for futur	e annual report notificat	ion)
For further i		ncerning this matte		·	
	Samantha T.	Alexander	201 _at (373-2068	
	Nam	e of Person	Area Code		
Enclosed i	s a check for t	he following amour	nt:		
		_	g Fee & □\$ atus Cert	155.00 Filing Fee & stified Copy onal copy is enclosed)	☐\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Division	g Address iling Section on of Corporations		Street Address New Filing Section D The Centre of Tallah	
		ox 6327 assee, FL 32314		2415 N. Monroe Stre Tallahassee, FL 3230	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	in Commence in			
The name of the Limited Liabili	ity Company is:			
D 111 1 C				
Red Hook Contracto	atin the words "Limited	Liability Campan	u "I I C " or "I I C ")	
(Must con	attit the words. Emitted	Clabinty Compan	y, L.E.C., or EEC.	
ARTICLE II - Address:				
The mailing address and street a	iddress of the principal c	office of the Limite	ed Liability Company is:	
<u>Princip</u>	oal Office Address:		Mailing Address:	
317 Martin Comer		2.1	7 Musleys Charles	
217 Market Street Kenilworth, NJ 070	33		7 Market Street enilworth, NJ 07033	
rem worth, 10 070.				
ARTICLE III - Registered Ag (The Limited Liability Company another business entity with an	y cannot serve as its own	Registered Agent	ent's Signature: You must designate an individual or	
The name and the Florida street	address of the registered	l agent are:		ZOZZ MAY I
	Corporation Service	Company		^^ ` 그 -
		Name		
	1201 Hays Street			Y 16
	Florida street addres	s (P.O. Box <u>NOT</u>	acceptable)	
	Tallahassee	FL	32301	
	City	State	Zip	[™] ≥ ö

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..

Corporation Service Company

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

"AMBR" = Authorized Member "MGR" = Manager <u>AMBR</u>	
<u>-</u>	
ANIDN	Regina Badali
	217 Market Street
	Kenilworth, NJ 07033
	SE SE
	DC 2
	- Table 1
	<u>ਜ਼ਿਲ੍ਹ</u>
	- A O O O O O O O O O O O O O O O O O O
(Use attachment if necessary)	μ_i
te of filing.)	eific and cannot be more than five business days prior to or 90 days eet the applicable statutory filing requirements, this date will not be list f State's records.
CLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
Sa	mantha Alexander mber or an authorized representative of a member.
Signature of a men This document is execute	nber or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State
I am aware that any false i	felony as provided for in s.817.155, F.S.
I am aware that any false i constitutes a third degree i	
I am aware that any false i constitutes a third degree I Samar	felony as provided for in s.817.155, F.S.

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)