# 2000234770

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	· · · · · · · · · · · · · · · · · · ·
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TALLAHASSEE, FL

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PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

05/31/22

NAME: 8116 JUNIPER LLC

TYPE OF FILING: ARTICLES

COST:

125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

#### COVER LETTER

TO:	New Filing Sec Division of Co						
SUBJE	8116 Junip	er LLC					
		Nan	ne of Limited	Liability Co	ompany		•
The end	closed Articles of	Organization and	fee(s) are sub	mitted for fi	ling.		
Please r	eturn all correspo	ondence concernin	g this matter t	o the follow	ving:		
	Kenneth Ray	y Noble, III					
			Na	ime of Perso	on		
	Noble Law I	irm, P.A.					
			Fi	rm/Compan	у		<del></del>
	6830 N. Fed	eral Hwy.					
		<del></del> -		Address			
	Boca Raton,	FL 33487					
	ray@noblelav	vfirmpa.com	City/St	ate and Zip	Code		
		E-mail address: (to	be used for fi	iture annual	report notificat	tion)	<del></del>
For furthe	er information co	ncerning this matte	r, please call:				
	Kenneth Nob	le	561 at (	353	-9300		
	Nam	e of Person	Area Co	ode Da	ytime Telephor	ne Number	
Enclosed	d is a check for th	ne following amou	nt:				
<b>≣\$</b> 125.	00 Filing Fce	□\$130.00 Filing Certificate of St	atus (	Certified Cop	iling Fee & py y is enclosed)	Certificate Certified C	Filing Fee, of Status & opy opy is enclosed)
	New Fi Divisio	g Address ling Section n of Corporations ox 6327		New F	Address Filing Section D entre of Tallah N. Monroe Stre	assce	

Tallahassee, FL 32303

Tallahassce, FL 32314

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMTIED LIABILITY COMPANY

FILED

Ā	R <sub>T</sub>	ICI.	E I	_	Na	me:
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The name of the Limited Liability Company is:

2022 MAY 31 PM 1: 04

8116 Juniper LLC	SECRETARY OF STAR
(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")	TALLAHASSEE, FL

#### ARTICLE II - Address:

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

Princips	l Office Address:		Mailing Address:		
6830 N. Federal Hwy.			6830 N. Federal Hwy.		
Boca Raton, FL 3348	Boca Raton, FL 33487		Boca Raton, FL 33487		
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an ad- The name and the Florida street a	cannot serve as its own ctive Florida registration	n Registered A on.) d agent are:	d Agent's Signature:  I gent. You must designate an individual or		
		Name			
	6830 N. Federal Hw	у	<u> </u>		
	Florida street addres	ss (P.O. Box 🐧	OT acceptable)		
	Boca Raton	FL	33487		
	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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

#### ARTICLE IV-

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

<u>Title:</u> "AMBR"	= Authorized Member	Name and Address:
"MGR" =	■ Manager	
MGR		Kenneth R. Noble
<del></del>		6830 N. Federal Highway
		Boca Raton, FL 33487
		S 28
		AS Z T
<del></del>		
		<u> </u>
		702
		Ser 78 F
<del> · · · · · · · · ·</del>	<del></del>	
(Use attac	chment if necessary)	
(If an effective dat the date of filing.) <u>Note:</u> If the date i	e is listed, the date must be spe	of filing: (OPTIONAL) cific and cannot be more than five business days prior to or 90 days after eet the applicable statutory filing requirements, this date will not be listed as f State's records.
ARTICLE VI: Oth	er provisions, if any.	
REQUIR	ED SIGNATURE:	
	This document is execute I am aware that any false constitutes a third degree	nber or an authorized representative of a member. and in accordance with section 605.0203 (1) (b), Florida Statutes. and information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.
	1/511/16	Typed or printed name of signee
		<del>-</del>

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)