

Florida Department of State

Division of Corporations

Electronic Filing Cover Sheet

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(((H220001901003)))



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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : GREENSPOON MARDER, P.A.

Account Number : 076064003722

Phone : (888)491-1120

Fax Number : (954)333-4242

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

Email Address: bill@firstliencapital.com

FLORIDA LIMITED LIABILITY CO.
AFL HOMES LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

FILED
2022 MAY 31 AM 8:40
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

T. SCOTT
AUG - 4 2022

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

AFL HOMES 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:

690 NE 13th Street, Suite 101

Fort Lauderdale, FL 33304

4755 Technology Way, Suite 104

Boca Raton, FL 33431

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:

Harris Howard

Name

4755 Technology Way, Suite 104

Florida street address (P.O. Box NOT acceptable)

Boca Raton

FL

33431

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.

[Signature]
Registered Agent's Signature (REQUIRED)

(CONTINUED)

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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

Name and Address:

MGR

AFL Manager LLC
4755 Technology Way, Suite 104
Bozta Ridge, FL 33431

AMBR

AFL Mortgage LLC
405 Lexington Ave, 59th Floor
New York NY 10174

AMBR

HOMES Inc
699 NE 13th Street Suite 101
Fort Lauderdale FL 33304

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: May 25th 2022 (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:

William Byrnes
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.

William Byrnes

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)

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