

L22000268590

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

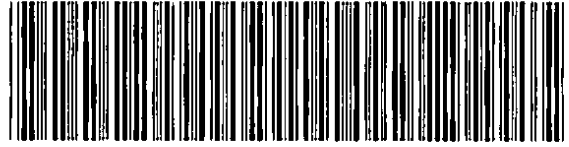
(Business Entity Name)

(Document Number)

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2022 JUN 13 AM 9:57 2022 JUN 13 PM 1:47

SECRETARY OF STATE
TALLAHASSEE, FL

DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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DATE: 6/7/2022

NAME: MIAMIHOOK LLC

TYPE OF FILING: ARTICLES

COST: 125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA000000015

AUTHORIZATION: ABBIE/PAUL HODGE

Paul Hodge

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: Miami Hook LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Abdul Mustafa

Name of Person

Miami Hook LLC

Firm/Company

8449 Boca Rio Dr

Address

Boca Raton, FL 33433

City/State and Zip Code

cpaforys@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Abdul Mustafa 833 255-8291

Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)
- \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address
New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

2022 JUN 13 AM 9:57

SECRETARY OF STATE
TALLAHASSEE, FL

ARTICLE I - Name:

The name of the Limited Liability Company is:

Miami Hook 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:

8449 Boca Rio Dr
Boca Raton, FL 33433

Same

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:

Abdul Mustafa

Name

8449 Boca Rio Dr

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

Boca Raton FL 33433

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)

