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(Requestor's Name)
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(Document Number)
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OPYICION TALLAHASSEE, FLORIDAS

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CORPORATE ACCESS, ____

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236 East 6th Avenue. Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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	CERTIFIED COPY					
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XX	FILING	LLC				_
_	SLS 4508 LLC CORPORATE NAME AND DO	CUMENT #)			_	<u>.</u>
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

ANTICLESOF ORGANIZATION FOR FLORID	A LIMITED LIABILITY COMPANY
ARTICLE I - Name: The name of the Limited Liability Company is:	2022 JUN 24 PM 3: 29
SLS 4508 LLC	SEGRETARY STATE TALLAHASSEE, FL
(Must contain the words "Limited Liability	
ARTICLE II - Address: The mailing address and street address of the principal office of t	he Limited Liability Company is:
Principal Office Address:	Mailing Address:
76 GRANDVIEW AVENUE	76 GRANDVIEW AVENUE
NANUET, NY 10954	NANUET, NY 10954
ARTICLE III - Registered Agent, Registered Office, & Regis (The Limited Liability Company cannot serve as its own Register another business entity with an active Florida registration.)	tered Agent's Signature: red Agent. You must designate an individual or
The name and the Florida street address of the registered agent at	re:
ELVIS BADILLO	
Name	
1300 SOUTH MIA	MLAVE

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..

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

FLORIDA

State

33130

Zip

MIAMI

City

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
AMBR	ELVIS BADILLO
	76 GRANDVIEW AVENUE
	NANUET NY 10954
	
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(Use attachment if necessary)	of Silver
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TLE V: Effective date, if other than the date ffective date is listed, the date must be spe of filing.) If the date inserted in this block does not exament's effective date on the Department.	pecific and cannot be more than five business days prior to or 90 days meet the applicable statutory filing requirements, this date will not be lis
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CLE V: Effective date, if other than the date ffective date is listed, the date must be spee of filing.) If the date inserted in this block does not usument's effective date on the Department of LE VI: Other provisions, if any. REOURED SIGNATURE: Signature of a metal this document is execulated any false.	Baddle ember or an authorized representative of a member. steed in accordance with section 605.0203 (1) (b). Florida Statutes. e information submitted in a document to the Department of State

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)

ARTICLE IV-