

To:

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From: Robert Evert

6/28/22, 12:40 PM

Division of Corporations

Florida Department of State
Division of Corporations
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From:

Account Name : BUSINESS FILINGS
Account Number : 105256001620
Phone : (608)827-5300
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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: Evinfeliciano@gmail.com

**FLORIDA LIMITED LIABILITY CO.
FEM SB 4th Street LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
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**ARTICLES OF ORGANIZATION
OF
FEM SB 4th Street LLC**

ARTICLE I NAME

The name of the limited liability company is: FEM SB 4th Street LLC

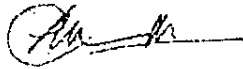
ARTICLE II ADDRESS

The principal place of business and mailing address of this Limited Liability Company shall be: 2 Changebridge Road Unit 201, Montville, New Jersey 07045.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the registered agent are: Business Filings Incorporated, 1200 South Pine Island Road, Plantation, Florida 33324. Located in the County of Broward.

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 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: _____
Chris Das, AVP, *Business Filings Incorporated*

Date: June 28, 2022

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STATE OF FLORIDA
CLERK OF SUPERIOR COURT
BROWARD COUNTY

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ARTICLE IV MANAGERS/MEMBERS


The management of the limited liability company is reserved for the managers and the name and address of the manager of the Limited Liability Company is:
SPC Associates LLC, 195 North Street, Suite 100, Teterboro, New Jersey 07608

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ARTICLE V DURATION

The duration for the limited liability company shall be: Perpetual.



Michael Hanson, Organizer

Date: 6/28/22

Authorized Representative

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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