# C2200320182 Orida Department of State

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : HAND ARENDALL MARRISON SALE LLC

Account Number : 120190000128 Phore : (350)769-3434 Fax Number : (850)769-6121

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

Enail Address: jcampfield@handfirm.com

### FLORIDA LIMITED LIABILITY CO. STS 4507 FURLING LANE SUITE 310 DESTIN FL, LLC

Certificate of Status	1
Certified Copy	0
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To:

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## ARTICLES OF ORGANIZATION OF STS 4507 FURLING LANE SUITE 310 DESTIN FL, LLC

#### ARTICLE 1 - NAME

The name of the limited liability company is STS 4507 FURLING LANE SUITE 310 DESTIN FL, LLC, ("company").

#### ARTICLE II - ADDRESS

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

Principal Office Address: 11275 US HWY 98 SUITE 6304 MIRAMAR BEACH EL 32550 Mailing Address: 11275 US HWY 98 SUITE 6304

MIRAMAR BEACH FL 32550 MIRAMAR BEACH FL 32550

ARTICLE III - REGISTERED AGENT.
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

The name and the Florida street address of the registered agent are:

HAND ARENDALL HARRISON SALE, LLC 35008 EMERALD COAST PKWY, STE 500 DESTIN, FL 32541 22 JUL 20 PM I2: 35
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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.

Dion J. Monin

HAND ARENDALL HARRISON SALE, LLC

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#### ARTICLE IV - MANAGERS OR MEMBERS

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

Title:

Name and Address:

"MGR" = Manager

"AMBR" = Authorized Member

AMBR, MGR

SARAH THI SCOTT 11275 US HWY 98 SUITE 6304 MIRAMAR BEACH FL 32550

ARTICLE V - EFFECTIVE DATE

The effective date of the company shall be 07/19/2022.

REQUIRED SIGNATURE:

Sarale thi Scott

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.

SARAH THI SCOTT

Typed or printed name of signee

22 JUL 20 PM 12: 35
SECRETARY OF STATE
TALLAHASSEF FI OPINA

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