

**C22000321891**

**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet**

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H22000245045 3)))



H220002450453ABCY

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

**To:**

Division of Corporations  
Fax Number : (850)617-6381

**From:**

Account Name : COMITER & SINGER, LLP  
Account Number : I20000000085  
Phone : (561)626-4742  
Fax Number : (561)626-4742

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

Email Address: Corporate@comiter-singer.com

**FLORIDA LIMITED LIABILITY CO.**

754 Park Avenue - Lake Park LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	<b>\$155.00</b>

2022 JUL 21 PM 2:13

RECEIVED  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

FILED  
22 JUL 21 PM 12:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H22000245045 3



July 19, 2022

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

COMITER & SINGER LLP

SUBJECT: 754 PARK AVE LLC  
REF: W22000094764

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L17000121582.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tammi Cline  
Regulatory Specialist II Supervisor

FAX Aud. #: H22000245045  
Letter Number: 922A00016122

FILED

22 JUL 21 PM 12:35

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H22000245045 3

## COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: 754 Park Avenue - Lake Park 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:

Andrew R. Comiter, Esq.

Name of Person

Comiter, Singer, Baseman & Braun, LLP

Firm/Company

3825 PGA Blvd., Suite 701

Address

Palm Beach Gardens, FL 33410

City/State and Zip Code

corporate@comitersinger.com

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

For further information concerning this matter, please call:

Alex Tirado

561

626-2101

at ( )

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

FILED  
22 JUL 21 PM 12:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H22000245045 3

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****ARTICLE I - Name:**

The name of the Limited Liability Company is:

754 Park Avenue - Lake Park 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:**901 North Olive Ave.  
West Palm Beach, FL 33401**Mailing Address:**901 North Olive Ave.  
West Palm Beach, FL 33401**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:

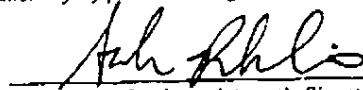
Comiter, Singer, Baseman & Braun, LLP

Name

3825 PGA Blvd., Suite 701Florida street address (P.O. Box NOT acceptable)

<u>Palm Beach Gardens</u>	<u>FL</u>	<u>33410</u>
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)

FILED  
22 JUL 21 PM 12:35  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

H220002450453

**ARTICLE IV-**

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

**Title:****Name and Address:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Yefry Jave  
 901 North Olive Ave.  
 West Palm Beach, FL 33401

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (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:**

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.

Andrew R. Comiter, Authorized Representative  
 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)

SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

22 JUL 21 PM 12:35

FILED

07/21/2022 14:33 FAX 15618264742

Comiter Singer

008

07/19/2022 16:23 FAX 15616264742

Comiter Singer

001

\*\*\*\*\*  
\*\*\* TX REPORT \*\*\*  
\*\*\*\*\*

TRANSMISSION COMPLETED

TX/RX NO. 1218  
DESTINATION NUMBER 8506176381  
DESTINATION ID  
ST. TIME 07/19 16:22  
COMMUNICATION TIME 01'16  
PAGES SENT 4  
RESULT OK

**Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet**

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

((H22000245045 3)))



H220002450453ABCY

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850)617-6381

From: Account Name : COMITER & SINGER, LLP  
Account Number : I2000000000085  
Phone : (561)626-4742  
Fax Number : (561)626-4742

SECRETARY OF STATE  
ALAHASSEE, FLORIDA

22 JUL 21 PM 12:35

FILED

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

Email Address: Corporate@comiter-singer.com

**FLORIDA LIMITED LIABILITY CO.**

754 Park Avenue - Lake Park LLC