

L2200334292
 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.

((H22000255891 3)))



H22000255891 3ABC1

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 : STOLZENBERG, GELLES & FLYNN, LLP
 Account Number : I20100000018
 Phone : (305)961-1450
 Fax Number : (305)423-3979

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

Email Address: tomtruske@me.com

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

22 JUL 28 AM 1:08

FILED

**FLORIDA LIMITED LIABILITY CO.
 POSH HOSPITALITY NO 3, CONGRESS AVENUE LLC**

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

2022 JUL 28 PM 5:16

SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

H22000255891 3

**ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY**

**ARTICLE I
NAME**

The name of the Limited Liability Company is:

POSH HOSPITALITY NO 3, CONGRESS AVENUE LLC

**ARTICLE II
ADDRESS**

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

Mailing Address:

501 SE 2ND ST, 703
FT LAUDERDALE 33301

Principal Office Address:

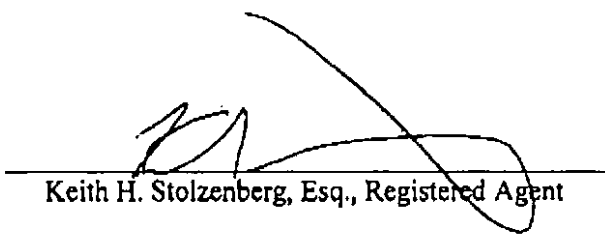
501 SE 2ND ST, 703
FT LAUDERDALE 33301

**ARTICLE III
REGISTERED AGENT AND REGISTERED OFFICE**

The name and street address of the registered agent is:

STOLZENBERG GELLES FLYNN & ARANGO, LLP
1533 SUNSET DR.
SUITE 150
MIAMI, FL 33143

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.


Keith H. Stolzenberg, Esq., Registered Agent

(CONTINUED)

H22000255891 3

22 JUL 28 AM 1:48
SECRETARY OF STATE
TALLAHASSEE

FILED

H22000255891 3

**ARTICLE IV
MANAGEMENT**

The Limited Liability Company is to be managed by manager(s) and is, therefore, a manager-managed company.

MGR: **THOMAS TRUSKE**
Manager 501 SE 2ND ST, 703
 FT LAUDERDALE 33301

MGR: **JOSEPH POSH**
Manager 501 SE 2ND ST, 703
 FT LAUDERDALE 33301



Keith H. Stolzenberg, Esq., 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.)

22 JUL 28 AM 1:08
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED

H22000255891 3