

9/15 11:13 AM 22000399717 Division of Corporations

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

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FLORIDA LIMITED LIABILITY CO.
KBS COLLINS OFFICE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

2022 SEP 15 PM 1:24

22 SEP 15 PM 12:35
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

KBS COLLINS OFFICE, LLC

(Must end with 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:

4747 COLLINS AVENUE, UNIT 807
MIAMI BEACH, FL 33140

Mailing Address:

4747 COLLINS AVENUE, UNIT 807
MIAMI BEACH, FL 33140

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:

AVRAHAM N. KALATSKY

Name

4747 COLLINS AVENUE, UNIT 807

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

MIAMI BEACH FL 33140

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..

DocuSigned by

Avi Kalatsky

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Registered Agent's Signature (REQUIRED)

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STATE OF FLORIDA
TALLAHASSEE, FLORIDA
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The name and address of each person authorized to manage and control the Limited Liability Company:

MIAMI BEACH, FL 33140

(Use attachment if necessary)

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.

— 543:7:88-2004

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.

Typed or printed name of signee

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