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Florida Department of State
Division of Corporations
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To:

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

From:

Account Name : HAND ARENDALL HARRISON SALE LLC
Account Number : 120190000128
Phone : (850)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.

Email Address: jeamplfield@handfirm.com

FLORIDA LIMITED LIABILITY CO.
FLSTRKING 2010 NE 57TH ST, LLC

| | |
|-----------------------|----------|
| Certificate of Status | 1 |
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$130.00 |

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**ARTICLES OF ORGANIZATION
OF
FLSTRKING 2010 NE 57TH ST, LLC**

ARTICLE I – NAME

The name of the limited liability company is FLSTRKING 2010 NE 57TH ST, LLC ("company").

ARTICLE II – ADDRESS

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

Principal Office Address:

2010 NE 57th St.

Ft. Lauderdale, FL 33308

Mailing Address:

2010 NE 57th St.

Ft. Lauderdale, FL 33308

**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

C/O DION MONIZ

35008 EMERALD COAST PKWY, STE 500

DESTIN, FL 32541

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:

CA943B12E6A7405
HAND ARENDALL HARRISON SALE, LLC

ARTICLE IV - MANAGERS OR MEMBERS

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

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Title:

"MGR" = Manager

"AMBR" = Authorized Member

Name and Address:

AMBR

SCOTT CASTRO

2010 NE 57th St.

Ft. Lauderdale, FL 33308

ARTICLE V - EFFECTIVE DATE

The effective date of the company shall be 10/01/2022.

REQUIRED SIGNATURE:

DocuSigned by:

Scott Castro

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.

SCOTT CASTRO

Typed or printed name of signer

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