

10/4/22, 11:01 AM

Division of Corporations
L22000431462
 Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

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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

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**FLORIDA LIMITED LIABILITY CO.
 ALL Real Estate Investments, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
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2022 OCT -6 PM 4:47

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October 5, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

KEITH B. BRAUN, ESQ
3825 PGA BLVD STE 701
PALM BEACH GARDENS, FL 33410

SUBJECT: ALL REAL ESTATE INVESTMENTS, LLC
REF: W22000126214

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 document number of the name conflict is P11000108865.

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KAIN COSTELLO
Regulatory Specialist II
New Filing Section

FAX Aud. #: E22000340065
Letter Number: 422A00022219

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OCT 10 2022
FAX 15616264742

H28000340065 3

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: ALL Real Estate Investment Holdings, 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:

Keith B. Braun, 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:

Keith B. Braun

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

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Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing Fee,
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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

6412149

H22000340065 3

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

ALL Real Estate Investment Holdings, 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:

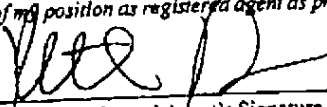
Principal Office Address:1655 Palm Beach Lakes Blvd.
Suite 900
West Palm Beach, FL 33401Mailing Address:1655 Palm Beach Lakes Blvd.
Suite 900
West Palm Beach, FL 33401**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(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
Name3825 PGA Blvd., Suite 701
Florida street address (P.O. Box **NOT** acceptable)Palm Beach Gardens FL 33410
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)

2022 OCT - 6 PM 12:50

10/06/2022 16:21 FAX 15616264742

Comiter Singer

005

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ARTICLE IV-

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

Title:

"AMBR" -- Authorized Member

"MGR" -- Manager

Name and Address:

MGR

Arnold Lampert
1655 Palm Beach Lakes Blvd., Suite 900
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.817.135, F.S.

Keith B. Braun, Authorized Representative

Typed or printed name of signer

Filing Fees:

\$126.00 Filing Fee for Articles of Organization and Designation of Registered Agent