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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 : NEW URBAN DEVELOPMENT
Account Number : I20200000033
Phone : (305)696-4450
Fax Number : (305)696-4455

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

Email Address: NDESAMDURS@NUDLLC.ORG

2022 OCT 10 AM 1:57

**FLORIDA LIMITED LIABILITY CO.
3685 GRAND AVENUE, LLC**

| | |
|-----------------------|----------|
| Certificate of Status | 1 |
| Certified Copy | 0 |
| Page Count | 04 |
| Estimated Charge | \$130.00 |

2022 OCT 10 PM 4:50

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COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: 3685 Grand Avenue, 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:

OLIVER L. GROSS

Name of Person

3685 Grand Avenue, LLC

Firm/Company

8500 NW 25TH AVENUE

Address

MIAMI, FL 33147

City/State and Zip Code

NDESAMOURS@NUDLLC.ORG

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

For further information concerning this matter, please call:

OLIVER L. GROSS 305 6964450
Name of Person at () 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

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

3685 Grand Avenue, 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:

8500 NW 25TH AVENUE
MIAMI, FL 33147

Mailing Address:

8500 NW 25TH AVENUE
MIAMI, FL 33147

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:

OLIVER L. GROSS

Name

8500 NW 25TH AVENUE

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

MIAMI

City

FLORIDA

State

33147

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.

Oliver L. Gross
Registered Agent's Signature (REQUIRED)

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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

AMBR

NUD GRAND AVE, LLC
8500 NW 25TH AVENUE
MIAMI, FL 33147

REQUIRED SIGNATURE:

Oliver L. Gross

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.

OLIVER L. GROSS

Typed or printed name of signer

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)

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