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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
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SECRETARY OF STATE

ALLAHASSEE FLOR

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
South Station LLC	
(Must contain the words "Limited Liability Company	v, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street address of the principal office of the Limite	ed Liability Company is:
Principal Office Address:	Mailing Address:

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:

ARTICLE I - Name:

Jaymi London
Name

1307 N Monroe Street Suite 2

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

Tancinssee Florida 32303

City State Zip

1307 N Monroe Street

Tallahassee, FL

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.,

(CONTINUED)

1 Acquire (REQUIRED)

2022 NOV -2 AM 6: 21 SECRETARY OF STATE

The name and address of each person address.	Name and Address:
mon	Jesse Edmunds 307 N Monroe street Soite2 Tallarassee FL 32303 US
(Use attachment if necessary) ARTICLE V: Effective date, if other than the date (If an effective date is listed, the date must be spetthe date of filing.) Note: If the date inserted in this block does not the document's effective date on the Department ARTICLE VI: Other provisions, if any.	of filing: \(\lambda \lambda \lambda \lambda \lambda \lambda \zeta \) OPTIONAL) ecific and cannot be more than five business days prior to or 90 days after applicable statutory filing requirements, this date will not be listed as a of State's records.
REOUIRED SIGNATURE: Signature of a This document is expense aware that any	A member of an authorized representative of a member. A member of an authorized representative of a member. Received in accordance with section 605.0203 (1) (b), Florida Statutes. Received in accordance with section 605.0203 (1) (b), Florida Statutes. Received in accordance with section 605.0203 (1) (b), Florida Statutes. Received in accordance with section 605.0203 (1) (b), Florida Statutes. Received in accordance with section 605.0203 (1) (b), Florida Statutes. Received in accordance with section 605.0203 (1) (b), Florida Statutes. Received in accordance with section 605.0203 (1) (b), Florida Statutes. Received in accordance with section 605.0203 (1) (b), Florida Statutes. Received in accordance with section 605.0203 (1) (b), Florida Statutes. Received in accordance with section 605.0203 (1) (b), Florida Statutes. Received in accordance with section 605.0203 (1) (b), Florida Statutes. Received in accordance with section 605.0203 (1) (b), Florida Statutes. Received in accordance with section 605.0203 (1) (b), Florida Statutes. Received in accordance with section 605.0203 (1) (b), Florida Statutes. Received in accordance with section 605.0203 (1) (b), Florida Statutes. Received in accordance with section 605.0203 (1) (b), Florida Statutes. Received in accordance with section 605.0203 (1) (b), Florida Statutes. Received in accordance with section 605.0203 (1) (b), Florida Statutes.
	Filing Fees: Fi

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)