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(Requestor's Name)
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(Business Entity Name)
(Document Number)
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Authorization Signature:	account: I202	<u> </u>
Steel, LLC Business	0	Document #
Walk in Pick up time		
Mail out		Will wait
Photocopy		
NEW FILINGS Profit Not for Profit X Limited Liability Domestication LLLP CORP		AMMENDMENTS AmendmentResignation of R.A. Officer/lChange of RegisteredDissolution/MergerConversionAFFIDAVID BY FOREIG
OTHER FILINGS		REGISTERATION/QUALIFICATION
Annual Report		Foreign filingStatement of AUTHORITY
		Reinstatement
Fictitious Name		

FLORIDA CAPITAL COURIER SERVICES, INC

(850) 524-5437 (850) 524-624 Please use funds from this account: I20210000160 Amount: \$ 125.00 Authorization Signature: Steel, LLC Document # **Business** Walk in Pick up time Mail out Will wait Photocopy Certified Copy of Articles of Organization Certificate of Status **NEW FILINGS AMMENDMENTS** ___Profit ___ Amendment Resignation of R.A. Officer/Director Not for Profit Change of Registered Agent X Limited Liability ____Domestication Dissolution/ ___LLLP Merger __ CORP Conversion AFFIDAVID BY FOREIGN CORP. REGISTERATION/QUALIFICATIONS **OTHER FILINGS** Foreign filing Annual Report Statement of AUTHORITY Reinstatement Fictitious Name Other APOSTIL Country

FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DRIVE

EXAMINER'S INITIALS:

TALLAHASSEE, FL 32309

COVER LETTER

	ew Filing Section ivision of Corporations			
SURIFCT	STEEL, LLC			
30030001		Limited Liabil	ity Company	
The enclose	ed Articles of Organization and fee(s) are submitted	l for filing.	
Please retur	rn all correspondence concerning this	matter to the	following:	
	Sandra Z. Green, Esq.			
		Name of	Person	
	JONATHAN H. GREEN & ASSOC	CIATES, P.A.		
		Firm/Co	mpany	
	901 Ponce de Leon Boulevard, Suite	e 601		
		Addı	ress	
	Coral Gables, Florida 33134			
		City/State ar	id Zip Code	
_	E-mail address: (to be us	sed for future	annual report notification	on)
For further in	nformation concerning this matter, ple	ease call:		
	Sandra Z. Green	305 (372-5100 _)	
•	Name of Person		Daytime Telephone	
Enclosed is	a check for the following amount:			
	Filing Fee \$130.00 Filing Fee Certificate of Status	Certif	5.00 Filing Fee & ed Copy al 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		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Street	ssee

Tallahassee, FL 32314

Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

STEEL, LLC		1100 C	
(Must	contain the words "Limited L	iability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address:			
The mailing address and stre	et address of the principal of	lice of the Limited Liability Company is:	
<u>Pri</u>	ncipal Office Address:	Mailing A	ddress:
282 NE 191 STREET, SUITE 31904		282 NE 191 STREET, SU	TTE 31904
MIAMI, FL 331		MIAMI, FL 33179-3899	
The Limited Liability Companother business entity with	Agent, Registered Office, & pany cannot serve as its own an active Florida registration reet address of the registered		n individual or 22 NOV 22
The Limited Liability Companother business entity with	pany cannot serve as its own an active Florida registration reet address of the registered	Registered Agent. You must designate an	
(The Limited Liability Companother business entity with	pany cannot serve as its own an active Florida registration reet address of the registered	Registered Agent. You must designate an 1.) agent are:	
The Limited Liability Companother business entity with	pany cannot serve as its own an active Florida registration reet address of the registered JONATHAN H. GRE	Registered Agent. You must designate and i.) agent are: EN & ASSOCIATES, P.A. Name	
(The Limited Liability Companother business entity with	pany cannot serve as its own an active Florida registration reet address of the registered JONATHAN H. GRE 901 Ponce de Leon B	Registered Agent. You must designate and i.) agent are: EN & ASSOCIATES, P.A. Name	22 NOV 22 AM 10: 22
(The Limited Liability Companother business entity with	pany cannot serve as its own an active Florida registration reet address of the registered JONATHAN H. GRE 901 Ponce de Leon B	Registered Agent. You must designate and i.) agent are: EN & ASSOCIATES, P.A. Name oulevard, Suite 601	

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)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager MGR AEGIS HOLDINGS, LLC 228 PARK AVENUE S., SUITE 31094 NEW YORK, NY 10003-1502 (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.

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.

SANDRA Z. GREEN, ESQ.

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

REQUIRED SIGNATURE:

\$ 5.00 Certificate of Status (Optional)