## 122000525448

(F	Requestor's Name)	
(F	Address)	
( <i>F</i>	Address)	<u> </u>
(0	City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
(E	Business Entity Name)	
(0	Document Number)	
Certified Copies	Certificates o	f Status
Special Instructions to F	Filing Officer:	<u> </u>

Office Use Only



600398928766

S CHATHAM

DEC 16 2022

2022 DE . 15 PH 1:50

## COVER LETTER

	Registration Section Division of Corporations	
SUD IFC	1306 Terrace Properties LLC	
SUBJECT	Name of Li	mited Liability Company
The enclo	sed Articles of Organization and fee(s) a	re submitted for filing.
Please reti	arn all correspondence concerning this n	natter to the following:
	Jay Butler	
		Name of Person
	Asset Protection Services of America	
		Firm/Company
	701 South Carson Street, Suite #200	
		Address
	Carson City, Nevada 89701	
	Admin@AssetProtectionServices.com	City/State and Zip Code
		d for future annual report notification)
For further	information concerning this matter, plea	se call:
	Jay Butler	775 461-5255
	Name of Person	Area Code Daytime Telephone Number
Enclosed	is a check for the following amount:	
\$125.00 H		S155.00 Filing Fee & S160.00 Filing Fee. Certified Copy (additional copy is enclosed)  S160.00 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  Division of Corporations  Clifton Building
	Tallahassee, FL 32314	2661 Executive Center Circle

Tallahassee, Fl. 32301

FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243

EXAMINER'S INITIALS:\_\_\_\_

PLEASE USE FUNDS FROM ACCT:	120210000160 AMOUNT: \$130.00
AUTHORIZATION:	eus felle
1306 Terrace Properties , LLC Business Name	Document Number, (if known):
Walk in	Pick up time
Mail out	Will wait
Photocopy	
Certified Copy	
_X_ Certificate of Status	
NEW FILINGS	<u>AMMENDMENTS</u>
Profit Not for Profit X_Limited Liability Domestication Other CORP PLLC	AmendmentResignation of R.A. Officer/DirectorChange of Registered AgentDissolution/WithdrawalMergerConversion
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	Foreign filing
Fictitious Name	Limited Partnership Reinstatement
APOSTIL ( ) Country	Other

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

1306 Terrace Pro	<del></del>			
(Must	end with the words "Limited	Liability Company.	'L.L.C.," or "LLC.")	
ARTICLE II - Address:		or - 23 12 2 31	COURT OF THE STATE	
The mailing address and str	eet address of the principal of	ffice of the Limited I.	iability Company is:	
<u>Pri</u>	ncipal Office Address:		Mailing Address:	
1306 SE 12th To	еггасе	Sail A	way Holdings LLC	
Cape Coral, FL	33990		Thomes Avenue	_ : :
ARTICLE III - Registered	l Agent, Registered Office,	Chevo	nne, WY 82001	
ARTICLE III - Registered (The Limited Liability Com- another business entity with	l Agent, Registered Office,	Cheyo & Registered Agent Registered Agent. Y n.)	nne, WY 82001 's Signature:	25
ARTICLE III - Registered (The Limited Liability Com- another business entity with	Agent, Registered Office, opany cannot serve as its own an active Florida registration	Cheve & Registered Agent Registered Agent. Y n.) Lagent are:	nne, WY 82001 's Signature:	
ARTICLE III - Registered (The Limited Liability Com another business entity with	Agent, Registered Office, opany cannot serve as its own an active Florida registration and address of the registered	Cheve & Registered Agent Registered Agent. Y n.) Lagent are:	nne, WY 82001 's Signature:	25
ARTICLE III - Registered (The Limited Liability Com another business entity with	Agent, Registered Office, opany cannot serve as its own an active Florida registration and address of the registered	& Registered Agent Registered Agent. Youn,) Lagent are:	nne, WY 82001 's Signature:	25
ARTICLE III - Registered (The Limited Liability Com another business entity with	I Agent, Registered Office, opany cannot serve as its own an active Florida registration reet address of the registered InCorp Services, Inc.	Cheve & Registered Agent Registered Agent. Youn.) I agent are: Name	nne, WY 82001 's Signature: ou must designate an individual or	25
ARTICLE III - Registered (The Limited Liability Com another business entity with	Agent, Registered Office, a pany cannot serve as its own an active Florida registration reet address of the registered InCorp Services, Inc.	Cheve & Registered Agent Registered Agent. Youn.) I agent are: Name	nne, WY 82001 's Signature: ou must designate an individual or	25

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)

Carlie Fecteau

Registered Agent's Signature (REQUIRED)

Page 1 of 2

<u>Title:</u>	Name and Address:	
"AMBR" = Authorized N	Nember	
"MGR" = Manager MGR	Sail Away Holdings LLC	
MGK	1908 Thomes Avenue	
	Cheyenne, WY 82001	
	<u></u> ^_	
		•
		۲
		=
<del></del>		
	<u></u>	_
		٠.
effective date is listed, the o	her than the date of filing:	) days
CLE V: Effective date, if of effective date is listed, the often of filing.)  If the date inserted in this	her than the date of filing:	
CLE V: Effective date, if of effective date is listed, the of te of filing.)  If the date inserted in this bournent's effective date on CLE VI: Other provisions, i	her than the date of filing:	
CLE V: Effective date, if of effective date is listed, the of te of filing.)  If the date inserted in this cument's effective date on CLE VI: Other provisions, i	her than the date of filing:	
CLE V: Effective date, if of effective date is listed, the of te of filing.)  If the date inserted in this cument's effective date on CLE VI: Other provisions, i	her than the date of filing:	
CLE V: Effective date, if of effective date is listed, the date of filing.) If the date inserted in this cument's effective date on CLE VI: Other provisions, i	her than the date of filing:	
CLE V: Effective date, if of effective date is listed, the date of filing.)  If the date inserted in this cument's effective date on CLE VI: Other provisions, i	her than the date of filing:	
CLE V: Effective date, if of effective date is listed, the date of filing.)  If the date inserted in this cument's effective date on CLE VI: Other provisions, i	her than the date of filing:	t be li
CLE V: Effective date, if of effective date is listed, the date of filing.)  If the date inserted in this cument's effective date on CLE VI: Other provisions, i  REQUIRED SIGNATURES  Signature of the company of the c	her than the date of filing:	t be li
CLE V: Effective date, if of effective date is listed, the date of filing.)  If the date inserted in this cument's effective date on CLE VI: Other provisions, i  REQUIRED SIGNATURES  Signature of the provision	block does not meet the applicable statutory filing requirements, this date will not the Department of State's records.  If any.  URE:  gnature of a member or an authorized representative of a member. current is executed in accordance with section 605.0203 (1) (b). Florida Statutes are that any false information submitted in a document to the Department of State as a third degree felony as provided for in s.817.155. F.S.	t be li
CLE V: Effective date, if of effective date is listed, the of te of filing.)  If the date inserted in this cument's effective date on CLE VI: Other provisions, i  REQUIRED SIGNATU  Signature of the constitution of the constitution of the constitution of the effective date of the cument's effective date on this cument's effective date in this cument's effective date.	her than the date of filing:	t be li