L23000001680

(Re	questor's Nar	ne)
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Pi	one #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity	Name)
(Do	cument Num	ber)
Certified Copies	_ Certific	ates of Status
Special Instructions to	Filing Officer:	
	-	



000385120750

04/05/22--01085--018 **125.00





2022 11 25 AM 8: 14

August 13, 2022

RODRIAM GUEVARA TERRANOVA 510 NE 59TH ST OAKLAND PARK, FL 33334

SUBJECT: COPLEY ONE LLC Ref. Number: W22000053364

We have received your document for COPLEY ONE LLC and your check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date is not acceptable since it is not within five working days of the date of receipt.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tyrone Scott
Regulatory Specialist II
New Filings Section

Letter Number: 822A00018100

COVER LETTER

TO: New Filing Section Division of Corpor					
Copley One LL SUBJECT:	Ľ				
	Name of Limited	Liability Company			
The enclosed Articles of Org	nnization and fee(s) are sub	omitted for filing.			
Please return all corresponde	ice concerning this matter	to the following:			
Rodriam Guevar	(Terranova				
	N	ame of Person			
	adriam Su	eyora			
	F	rm/Company			
510 NE 59th St					
		Address	·		
Oakland Park FI	33334				
rodriamguevara@g	_	tate and Zip Code			
		uture annual report notification	on)		
For further information concern	ing this matter, please call	:			
Rodriam Guevara	Terranova 786	620-4948			
Name of I		ode Daytime Telephone	Number		
Enclosed is a check for the fol	llowing amount:				
	ertificate of Status	□\$155.00 Filing Fee & Certified Copy Iditional copy is enclosed)	□\$160,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Ad		Street Address			
	Corporations	New Filing Section Division The Centre of Tallahassee			
P.O. Box 63 Tallahassee.		2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303			

ARTICLES OF OR GANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability C	Company is:				
Copley One LLC					
(Must contain	rt h e words "Limited	Hiability Company.	"L.L.C.," or "LLC.")	•	
ARTICLE H - Address: The mailing address and street addr	ess of the principal	office of the Limited	Liability Company is:		
<u>Principal (</u>	Office Address:		Mailing Ad	dress:	
510 NE 59th St Oakland Park FL 33334			510 NE 59th St Oakland Park FL 33334		
ARTICLE III - Registered Agent (The Limited Liability Company ca another business entity with an acti	mot serve as its ow ve Florida registrati	n Registered Agent. 'ion.)	nt's Signature: You must designate an i	ndividual or	
	Rodriam Guevara T	·			
<u>.</u>	waran cactara i	Name			
	EID NIC EDAL C.				
_	510 NE 59th St Florida street addre	ss (P.O. Box NOT ac	ccentable)		
	Dakland Park	FI.	33334		
_	City	State	Zip		
aving been named as registered age lace designated in this certificate. I h rther agree to comply with the provi n familiar with and accept the obliga	erchy accept the appointment of all statutes to attorns of my position Rod	pointment as registere relating to the proper t as registered agent a	d agent and agree to ac and complete performa is provided for in Chapti	t in this capacity. T nce of my duties, and F	

ARTICLE IV- The name and address	of each person autho	rized to manage and control the J	Limited Liability Com	npany:
<u>Title:</u> "AMBR" = Authorized "MGR" = Manager	Member	Name and Address:		
MGR	_	Rodriam Guevara Terranova 510 NE 59th St Oakland Park FL 33334		
	<u> </u>		<u> </u>	
			_	
(Use attachment if need ARTICLE V: Effective date, if c (If an effective date is listed, the the date of filing.) Note: If the date inserted in this the document's effective date or	ther than the date of date must be speci- block does not mee	et the applicable statutory filing re		to or 90 days after
ARTICLE VI: Other provisions.	fany.			
<u>REOUIRED</u> SIGNAT	URE:	driam G.	7-	
This de Lam av	rument is executed are that any false in	per or an authorized representa in accordance with section 605.0 formation submitted in a docume lony as provided for in s.817.155	9203 (1) (b), Florida S int to the Department o	
į	Rodriam Guevara Te	erranova Typed or printed name of signee		ZECR SECR
\$ 30,00 Certified Co		<u>Filing Fees;</u> nization and Designation of Reg	gistered Agent 7. P. OR.	MILE MASSFOF
			10%	G