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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

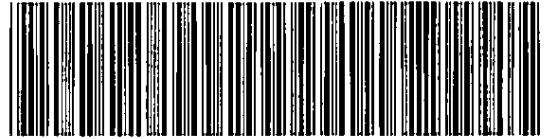
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



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2023 JAN 11 AM 11:51

2023 JAN 11 AM 11:51

ED

**COVER LETTER**

**TO: New Filing Section  
Division of Corporations**

**SUBJECT:** CYNTHIA SPRAY HOMES 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:

CYNTHIA SPRAY

Name of Person

CCS ARCHITECTURAL ENTERPRISES, INC

Firm/Company

2385 NW EXECUTIVE CENTER DRIVE, SUITE 100

Address

BOCA RATON FL 33433

City/State and Zip Code

CSPRAY@CCSARCHENTER.COM

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

For further information concerning this matter, please call:

CYNTHIA SPRAY      561      479-9884  
at (      )  
Name of Person      Area Code      Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |   |   |
|--|--|---|---|
| <input type="checkbox"/> \$125.00 Filing Fee | <input checked="" type="checkbox"/> \$130.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$155.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

2008 JUL 11 AM 11:51

ED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CYNTHIA SPRAY HOMES 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:

Mailing Address:

<u>2385 NW EXECUTIVE CENTER DRIVE</u>	<u>SAME</u>
<u>SUITE 100</u>	<u></u>
<u>BOCA RATON, FL 33433</u>	<u></u>

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:

CYNTHIA SPRAY  
Name

2385 NW EXECUTIVE CENTER DRIVE, SUITE 100  
Florida street address (P.O. Box **NOT** acceptable)

<u>BOCA RATON</u>	<u>FL</u>	<u>33433</u>
City	State	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..*

  
\_\_\_\_\_  
Registered Agent's Signature (REQUIRED)

(CONTINUED)

2023 JUN 14 AM 11:51  
-D

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

**Name and Address:**

MGR MEMBER

CYNTHIA SPRAY

2385 NW EXECUTIVE CENTER DRIVE, SUITE 100

BOCA RATON, FL 33433

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(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: 12-30-2022 (OPTIONAL)

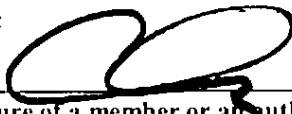
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**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.

NONE

**REQUIRED SIGNATURE:**



\_\_\_\_\_  
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.

CYNTHIA SPRAY  
\_\_\_\_\_  
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)

\$ 5.00 Certificate of Status (Optional)

2023 JAN -4 AM 11:52

ED

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Division of Corporations

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Address

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CSPRAY@CCSARCHENTER.COM

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CYNTHIA SPRAY      561      479-9884  
Name of Person      at (      )      Daytime Telephone Number

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- ☐ \$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)

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2023 JUN -3 AM 11:52

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Mailing Address:

2385 NW EXECUTIVE CENTER DRIVE  
SUITE 100  
BOCA RATON, FL 33433

SAME

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(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:

CYNTHIA

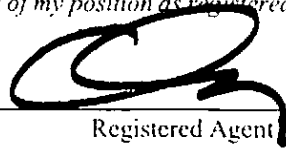
SPRAY  
Name

2385 NW EXECUTIVE CENTER DRIVE, SUITE 100

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

BOCA RATON	FL	33433
City	State	Zip

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Registered Agent's Signature (REQUIRED)

(CONTINUED)

2023 JUN - 14 AM 11:52  
JUL 14 2023

ED

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**Name and Address:**

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"MGR" = Manager

MGR MEMBER

CYNTHIA SPRAY  
2385 NW EXECUTIVE CENTER DRIVE, SUITE 100  
BOCA RATON, FL 33433

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CYNTHIA SPRAY  
\_\_\_\_\_  
Typed or printed name of signer

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\$ 5.00 Certificate of Status (Optional)

2023 JAN -6 AM 11:52  
FILED  
CLERK OF COURT  
STATE OF FLORIDA