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COVER LETTER

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

SUBJECT: 1266 NE 182ND ST NMB, 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:

Shai Perry

Name of Person

Firm/Company

1266 NE 182nd Street

Address

North Miami Beach, FL 33162

City/State and Zip Code

sp4000@gmail.com

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

For further information concerning this matter, please call:

_____ at (_____) _____
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$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)

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

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155 Office Plaza Dr Ste A Tallahassee FL 32301
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DATE: 01/11/23

NAME: 1266 NE 182ND ST NMB. L.L.C

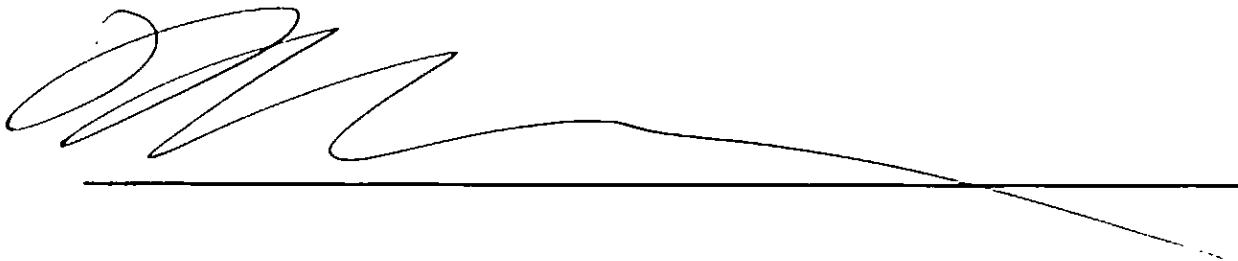
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AUTHORIZATION: ABBIE/PAUL HODGE



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

1266 NE 182ND ST NMB, 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:

37 Deerwood Road
Suffern, NY 10901

37 Deerwood Road
Suffern, NY 10901

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:

Shai Perry

Name

1266 NE 182nd Street

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

North Miami Beach

FL

33162

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.

Shai Perry

Registered Agent's Signature (REQUIRED)

(CONTINUED)

23 JAN 11 AM 7:17
SECRETARY
DIVISION

