# L23000028241

(Requestor's Name)
(Address)
(Address)
(1881633)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Document number)
: Copies Certificates of Status
al instructions to Filing Officer:

Office Use Only



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# Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312 (850) 656-4724

DOCUMENT NUMBE	R		
	**PLEASE FILE THE	E ATTACHED AND RETURN**	
	Plain Copy		
XXXX	Certified Copy		
	Certificate of States		
	**PLEASE OBTAIN THE PO	DLLOWING FOR THE ABOVE ENTITY**	
	Certified Copy of Arts 8	& Amendments	
	Certified Copy of Arts E	& Amendments Complete File (Including Annual Reports)	
	Certificate of Status		
	Certificate of Status Ref	flesting:	
	**APOSTILLE' / N	HOTARIAL CERTIFICATION**	
COUNTRY OF DESTINA	4TION		
NUMBER OF CERTIFIC	PATES REQUESTED		
TOTAL OWED \$ [	55	ACCOUNT # 120140000108 (Comporate United Corporate Services, Inc.  Ny issaes or concerns, Thank you so much!	 1

#### COVER LETTER

TO:	New Filing Se Division of Co				
SUBJECT: 1010 Mill Cro Name of Li			eek MM, LLC nited Liability Company		
The en	closed Articles of	Organization and fee(s) are	e submitted for filing.		
Please	return all corresp	ondence concerning this ma	atter to the following:		
		Lisa A. Manko	ski		
			Name of Person		
		Lofty Investm	nent Holdings, LLC		
			Firm/Company		
		4025 Sunbeam	Road		
	<del></del>		Address		
		Jacksonville, FL	32257		
			ity/State and Zip Code	<del></del>	
		lmassis@lofty	asset.com		
			for future annual report notificat	tion)	
For furth	ner information co	oncerning this matter, please	call:		
	_Lisa Ma				
	Nan	ne of Person A	rea Code Daytime Telephor	ne Number	
Enclos	ed is a check for t	he following amount:			
□ <b>\$</b> 12.	5.00 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)	
		ng Address	Street Address		
		iling Section	New Filing Section D		
		on of Corporations lox 6327	The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		
		assee, FL 32314	Tallahassee, FL 32303		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liability	Company is:			
1010 Mill Creek MM (Must conta		Liability Con	pany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street ad	dress of the principal o	office of the L	mited Liability Company is:	; •
<u>Principa</u>	l Office Address:		Mailing Address:	ć
4025 Sunbeam Road Jacksonville, FL 3225	7	<del></del>	4025 Sunbeam Road Jacksonville, FL 32257	_ r:
ARTICLE III - Registered Ages (The Limited Liability Company another business entity with an ac The name and the Florida street a	cannot serve as its own ctive Florida registration	n Registered A on.) d agent are:	gent. You must designate an individual or	
		Name		
	4025 Sunbeam Road Florida street address (P.O. Box NOT acceptable)		OT acceptable)	
	Jacksonvill <b>e</b>	FL	32257	
	City	State	Zip	
place designated in this certificate, i further agree to comply with the pro	hereby accept the app visions of all statutes r	oointment as re elating to the p	for the above stated limited liability compan gistered agent and agree to act in this capad proper and complete performance of my duti agent as provided for in Chapter 605, F.S	city. I
	/s/ Lisa A. M	Mankoski		
	Regis	tered Agent's	Signature (REQUIRED)	

(CONTINUED)

#### 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 — Wanager	Lofty Investment Holdings, LLC  4025 Sunbeam Road  Jacksonville, FL 32257
	JAN X
	- STATE ONE
(Use attachment if necessary)	
If an effective date is listed, the date must be s he date of filing.)	te of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 days after t meet the applicable statutory filing requirements, this date will not be listed a
RTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
	/s/ Lisa A. Mankoski
Signature of a r This document is exec I am aware that any fal	nember or an authorized representative of a member. cuted in accordance with section 605.0203 (1) (b), Florida Statutes. lse information submitted in a document to the Department of State ree felony as provided for in s.817.155, F.S.
Lisa A. Manko	Ski 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)