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(Requestor's Name)
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PICK-UP WAIT MAIL
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Special Instructions to Filing Officer:

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SCHATHAN DOS



RECEIVED

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

A contract of the contract of

Phone: 850-558-1500
ACCOUNT NO. : 12000000195
REFERENCE: 410374 4309934
AUTHORIZATION: Surela Clera
COST LIMIT : \$ 160-00.
ORDER DATE : January 25, 2023
ORDER TIME : 2:37 PM
ORDER NO. : 410374-005
CUSTOMER NO: 4309934
DOMESTIC FILING
NAME: PRINCESS SEM INVESTMENTS LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XXCERTIFIED COPY
YX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT PERSON: Eyliena Baker - EXT.
EXAMINER'S INITIALS:

			COVE	RLETTE	ER .	
	New Filing Sec Division of Cor					
SUBJEC		EM Investments LI	LC			
	··· <u></u>	Nan	e of Limite	d Liabilit	y Company	
The enclo	osed Articles of	Organiz ati on and i	ee(s) are su	ıbmitted f	or filing.	
Please re	turn all correspo	ndence concerning	g this matter	r to the fo	llowing:	
	Stacey Elliot	, Paralegal				
				Name of P	erson	
	McLane Mid	dleton, P.A.				
				Firm/Com	pany	
	900 Elm Stre	et				
				Addres	ss	
	Manchester,	NH 03101				
			City/	State and	Zip Code	
	stacey.elliot@					
	£	E-mail address: (to	be used for	future an	nual report notificati	on)
For further	information cor	ncerning this matte	r, please ca	H:		
	Christopher A	1. Dube. Esq.	603 at (628-1437	
	Name	e of Person			Daytime Telephon	e Number
Enclosed	is a check for th	e following amou	ıt:			
□\$125.0	00 Filing Fee	□\$130.00 Filing Certificate of St	atus	Certified	00 Filing Fee & I Copy copy is enclosed)	■\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
New Filing Section
Division of Corporations

Street Address New Filing Section Division The Centre of Tallahassee

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Princess SEM Inv (Must co	restments LLC ontain the words "Limited	Liability Company	."L.L.C" or "LLC.")	_
ARTICLE II - Address: The mailing address and stree			,	
<u>Princ</u>	cipal Office Address:		Mailing Address:	
75 Maple Circle		75 :	Maple Circle	
Sanbornton, NH (03269		bornton, NH 03269	-
ARTICLE III - Registered A	Agent, Registered Office.	& Registered Age	nt's Signature	- 23 C
ARTICLE III - Registered A (The Limited Liability Compa another business entity with a	my cannot serve as its own	i Registered Agent.	nt's Signature: You must designate an individual or	$\omega <$
(The Limited Liability Compa	iny cannot serve as its own in active Florida registration	n Registered Agent. on.)	nt's Signature: You must designate an individual or	CROPS S
(The Limited Liability Compa another business entity with a	iny cannot serve as its own in active Florida registration	n Registered Agent. on.) d agent are:	nt's Signature: You must designate an individual or	CROPS S
(The Limited Liability Compa another business entity with a	any cannot serve as its own an active Florida registration active florida registered et address of the registered	n Registered Agent. on.) d agent are:	nt's Signature: You must designate an individual or	CROPS S
(The Limited Liability Compa another business entity with a	any cannot serve as its own an active Florida registration active florida registered et address of the registered	n Registered Agent. on.) d agent are: Company	nt's Signature: You must designate an individual or	£ 25
(The Limited Liability Compa another business entity with a	any cannot serve as its own an active Florida registration active Florida registered et address of the registered Corporation Service	n Registered Agent. on.) d agent are: <u>Company</u> Name	You must designate an individual or	CROPS S
(The Limited Liability Compa another business entity with a	any cannot serve as its own active Florida registration at address of the registered Corporation Service 1201 Hays Street	n Registered Agent. on.) d agent are: <u>Company</u> Name	You must designate an individual or	CROPS S

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..

Assistant Vice President

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = 7 "MGR" = M.	Authorized Member	Name and Address:		
MGR = W.	anager 	Raymond L. Masse 75 Maple Circle Sanbornton, NH 03269	-	
			23 JAN 2	7. VOISTATE
			2 'bh' t: 2'	-1,2 -1,2 -1,2 -1,2 -1,2 -1,2 -1,2 -1,2
(Use attachm	ent if necessary)			
(If an effective date is the date of filing.) Note: If the date inse	listed, the date must be s	te of filing:	•	
ARTICLE VI: Other p	·			
REOUIRED	SIGNATURAGES Signed by: Raymond L. WAS SHAURURANET	Massu nember or an authorized representative of a member.		
	I his document is executed any false	number or an authorized representative of a member, uted in accordance with section 605.0203 (1) (b). Florida Statutes, se information submitted in a document to the Department of State ee felony as provided for in s.817.155, F.S.		
	Raymond L. Ma	asse, Manager		

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)