## 1230000080129

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	
PICK-UP WAIT MA	IL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	

Office Use Only



200401246282



91/16.26--01015--001 \*\*160.00

SECRETARY OF STATE

2023 JAN 13 AM 5: 01

## COVER LETTER

то:	New Filing Sect Division of Corp				
0111112	Subotai, LL	С			
SUBJE	C1:	Name	of Limited Liab	ility Company	
The end	closed Articles of (	Organization and fee	e(s) are submitte	ed for filing.	
Please	return all correspo	ndence concerning t	his matter to the	following:	
	Ryan Younge	er			
			Nane	of Person	
	Subotai, LLC				_
	<u>.,, ., ., ., ., ., ., ., ., ., ., ., ., </u>		Firm/0	Company	
	9450 SW 77	th Avenue, Apt Q4			
			Ad	dress	
	Miami, Flori	ida 33156			
			City/State	and Zip Code	
	ryan.younger(			<u>,</u> <u></u>	
	i	E-mail address: (to b	e used for futur	e annual report notificati	ion)
For furtl	ner information co	ncerning this matter	, please call:		
	Ryan Young	ет	786 at (	510-3834	
	Nam	ne of Person	Area Code	Daytime Telephon	ne Number
Enclos	sed is a check for t	he following amoun	1:		
□\$12	25.00 Filing Fee	□\$130.00 Filing Certificate of Sta	ius Cer	155.00 Filing Fee & tified Copy is enclosed)	■\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed
					SO E

Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address New Filing Section Division The Centre of Tailahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

2023 JAN 13 AM 5: 01

## $ARTICLES\,OF\,ORGANIZATION\,FOR\,FLORIDA\,LIMITED\,LIABILITY\,COMPANY$

Subotai, LLC			<u> </u>	
	ontain the words "Limited L	iability Company, "L.I	L.C.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and stree	et address of the principal of	fice of the Limited Lia	bility Company is:	
Principal Office Address:			Mailing Address:	
9450 SW 77th A	ve	9450 SW 77th Ave Apt Q4		
Apt Q4				
Miami, Florida 33156		Miami, Florida 33156		
ARTICLE III - Registered	Agent, Registered Office, &	& Registered Agent's	Signature:	
The Limited Liability Comp mother business entity with	any cannot serve as its own l an active Florida registration ect address of the registered	Registered Agent, You n.)	Signature: i must designate an individual oi	
The Limited Liability Comp mother business entity with	any cannot serve as its own l an active Florida registration	Registered Agent, You n.) agent are:	Signature: i must designate an individual or	
The Limited Liability Comp mother business entity with	any cannot serve as its own l an active Florida registration ect address of the registered	Registered Agent, You n.)	Signature: i must designate an individual or	
The Limited Liability Comp mother business entity with	any cannot serve as its own l an active Florida registration ect address of the registered	Registered Agent, You n.) agent are: Name	Signature: i must designate an individual or	
The Limited Liability Comp mother business entity with	any cannot serve as its own lan active Florida registration eet address of the registered  Ryan Younger  9450 SW 77th Ave. A	Registered Agent, You n.) agent are: Name	i must designate an individual of	
The Limited Liability Comp mother business entity with	any cannot serve as its own lan active Florida registration eet address of the registered  Ryan Younger  9450 SW 77th Ave. A	Registered Agent, Young,  agent are:  Name  Apt Q4	i must designate an individual of	

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)

CECHETARY OF STATE

ARTICLE IV-

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

<u>Title:</u>	Name and Address:		
"AMBR" = Authorized Member			
"MGR" = Manager			
MGR	Ryan Younger		
Mon	9450 SW 77th Ave, Apt Q4		-
	Miami, FL 33156		
			,
<del></del>			-
			-
			-
			_
n effective date is listed, the date must be	ate of filing:	rior to or 90	
TICLE VI: Other provisions, if any.			
REQUIRED SIGNATURE:	Sy. Uz-		
This document is exc	member or an authorized representative of a member oction and authorized representative of a member oction in accordance with section 605.0203 (1) (b), Florialse information submitted in a document to the Department of the Depar	ida Statutes.	
	•		
<u>Ryan Younge</u>	r	<del></del>	
	Typed or printed name of signee	(2)	25
			<u> </u>
	Filing Fees:		2023 JAN
\$135.00 Villian Kon for Articles of			
\$ 30.00 Certified Copy (Optional	Organization and Designation of Registered Agent	rn	

\$ 5.00 Certificate of Status (Optional)