

L23000 105432

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

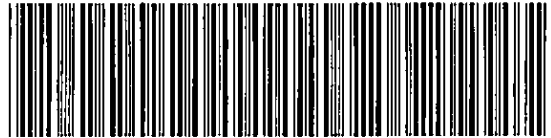
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300402999573

FILED

2023 MAR -7 AM 8:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

03/07/23--01002--020 **125.00

RECEIVED

2023 MAR -7 AM 11:17

DIRECTOR OF CORPORATIONS
TALLAHASSEE, FLORIDA

**CORPORATE
ACCESS,
INC.**

When you need ACCESS to the world

236 East 6th Avenue, Tallahassee, Florida 32303
P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666

WALK IN

PICK UP: CAT 3/7

- ☐ **CERTIFIED COPY** _____
- xx** **PHOTOCOPY** _____
- ☐ **CUS** _____
- xx** **FILING** LLC _____

1. **STELLA BIRD, LLC**
(CORPORATE NAME AND DOCUMENT #) _____
2. _____
(CORPORATE NAME AND DOCUMENT #) _____
3. _____
(CORPORATE NAME AND DOCUMENT #) _____
4. _____
(CORPORATE NAME AND DOCUMENT #) _____
5. _____
(CORPORATE NAME AND DOCUMENT #) _____
6. _____
(CORPORATE NAME AND DOCUMENT #) _____

**SPECIAL
INSTRUCTIONS:**

**Articles of Organization
For a
Florida Limited Liability Company**

Article I

The name of the Limited Liability Company is:
STELLA BIRD, LLC

Article II

The mailing address of the principal office of the Limited Liability Company is:
1007 PARK STREET NORTH
ST. PETERSBURG, FLORIDA 33710

Article III

The purpose for which this Limited Liability Company is organized is:
OWN REAL ESTATE AND ANY OTHER LAWFUL PURPOSE

Article IV

The name and Florida street address of the registered agent is:
ALAN M. GROSS
4731 CENTRAL AVENUE
ST. PETERSBURG, FL 33713

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.

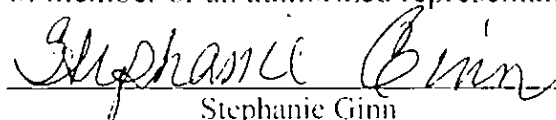
Registered Agent Signature: 

Article V

The name and address of managing members/managers are:

TITLE: MGR
STEPHANIE GINN
1007 PARK STREET NORTH
ST PETERSBURG, FLORIDA 33710

Signature of member or an authorized representative of a member:

Signature: 
Stephanie Ginn

FILED
2023 MAR -7 AM 8:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA