L23000110581

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ddress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



500403988565

03/09/23--01027--010 **250.00

2029 MAR -9 PM 3: 3 ALI AHASSEE, 111

ALLAHASSEE, FLORING

CORPORATE ACCESS, ____

When you need ACCESS to the world

INC.

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

	FICE	K UP: <u>CAT</u>	317	_	
. 🗆	CERTIFIED COPY				
xx	РНОТОСОРУ				
	CUS			8 - 11 - 11	
xx	FILING	LLC			
1.	17140 RESERVA LLC (CORPORATE NAME AND DOCU	MENT #)			
2.	(CORPORATE NAME AND DOCU	MENT #)			
3.	(CORPORATE NAME AND DOCU	MENT #)		<u> </u>	
4.	(CORPORATE NAME AND DOCU	MENT #)		-	
5.	(CORPORATE NAME AND DOCU	MENT #)			
6.	(CORPORATE NAME AND DOCU	MENT #)	···		
SPECIA INSTRU	AL UCTIONS:				

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liabili	ty Company is:			
171.40 D				
17140 Reserva LLC		ishility Com	pany, "L.L.C.," or "LLC.")	
(Musi com	am me words Emmed E	ability Com	pany, L.E.C., or LCC.	
ARTICLE II - Address: The mailing address and street a	ddress of the principal off	ice of the Li	mited Liability Company is:	
<u>Princip</u>	al Office Address:		Mailing Ad	dress:
1029 Fordham Lane			1029 Fordham Lane	
Woodmere, New Yo	ork 11598	_	Woodmere, New York 115	98
				
another business entity with an The name and the Florida street	_	igent are:		
		Name		
	801 US Highway 1 Florida street address	(D.O. Day N	OT againtable)	
	riorida sirect address	(r.O. box <u>8</u>	of acceptable)	
	North Palm Beach	FL	33408	
	City	State	Zip	
laving been named as registered place designated in this certificate further agree to comply with the plam familiar with and accept the or	. I hereby accept the appoint the common transfer of all statutes reliances.	ntment as reating to the p	gistered agent and agree to a proper and complete perform	ct in this capacity. I ance of my duties, and I
	Kristen Funda	ro		
			Signature (REQUIRED)	_
	_	-		
		(CONTINU	J ED)	



	horized Member
"MGR" = Man	
MGR	
	Woodmere, New York 11598
	woodingte, New York 11398
MGR	
·	1029 Fordham Lane
	Woodmere, New York 11598
·	
	
E V: Effective ective date is lift filing.)	late, if other than the date of filing:
ective date is lift filing.) the date insertenent's effective EVI: Other pre	date, if other than the date of filing:
E V: Effective extive date is lift filing.) the date insertement's effective E VI: Other production of the production of	date, if other than the date of filing:
E V: Effective ctive date is lifting.) the date insertement's effective E VI: Other proed liability con	date, if other than the date of filing:
E V: Effective ctive date is lift filing.) the date insertenent's effective E VI: Other pro	date, if other than the date of filing:
E V: Effective extive date is lift filing.) the date insertement's effective E VI: Other production of the production of	date, if other than the date of filing:

as

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

ARTICLE IV-

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