

# L23000125465

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

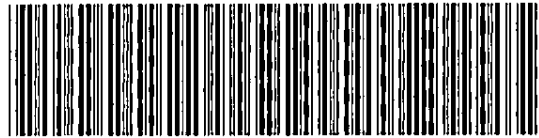
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



900403170849

2023 MAR 14 2023

FILED

2023 MAR 14 AM 9:04

STATE OF FLORIDA

RECEIVED

2023 MAR 14 PM 12:51

CLERK OF SUPERIOR COURT  
STATE OF FLORIDA

**FLORIDA FILING & SEARCH SERVICES, INC.**

**P.O. BOX 10662 TALLAHASSEE, FL 32302**

**155 Office Plaza Dr Ste A Tallahassee FL 32301**

**PHONE: (800) 435-9371; FAX: (866) 860-8395**

---

**DATE: 03/14/23**

**NAME: 160 NW 28 ST ASSOCIATES LLC**

**TYPE OF FILING: ARTICLES**


**COST: 125.00**

**RETURN: PLAIN COPY PLEASE**

---

**ACCOUNT: FCA000000015**

**AUTHORIZATION: ABBIE/PAUL HODGE**



---



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

March 15, 2023

FLORIDA FILING & SEARCH SERVICES, INC.

SUBJECT: 160 NW 28 ST ASSOCIATES LLC  
Ref. Number: W23000035588

We have received your document for 160 NW 28 ST ASSOCIATES LLC.  
However, the document has not been filed and is being returned for the following:

The principal, mailing, and registered agent address must contain a zip code.,

If you have any further questions concerning your document, please call (850)  
245-6000.

Summer Chatham  
Regulatory Specialist III  
Director's Office

Letter Number: 023A00006027

*Please keep original filing date*  
*Thank you!*

RECEIVED  
2023 MAR 17 PM 12:47  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION  
OF  
160 NW 28 ST ASSOCIATES LLC**

**FILED**  
2023 MAR 14 AM 9:04  
SEC. OF STATE  
TALLAHASSEE, FL

**ARTICLE I: NAME**

The name of the limited liability company is 160 NW 28 ST ASSOCIATES LLC (the "LLC").

**ARTICLE II: MAILING AND PRINCIPAL ADDRESS**

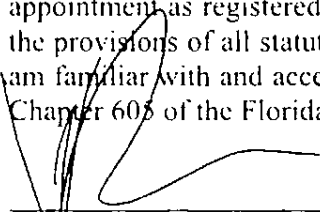
The street and mailing address of the principal office of the LLC is 2999 NE 191 Street, Suite 800, Aventura, Florida 33180.

**ARTICLE III: REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE**

The name and the Florida street address of the initial registered agent of the LLC are:

Victor Recondo, P.A.  
2999 NE 191 Street, Suite 800, Aventura, Florida 33180

Having been named as registered agent to accept service of process for the above stated limited liability company at the place designated in these Articles of Organization, 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 603 of the Florida Statutes.

  
\_\_\_\_\_  
Victor Recondo, P.A.

**ARTICLE IV: EFFECTIVE DATE AND TIME**

The effective date and time of these Articles of Organization shall be the date and time that these Articles of Organization are filed with the Florida Department of State, Division of Corporations.

**ARTICLE V: PURPOSE**

The LLC is being formed for the purpose of transacting any and all lawful business for which a limited liability company may be organized under the Florida Revised Limited Liability Company Act.

**ARTICLE VI: DURATION**

The LLC is formed for an indefinite duration.

## ARTICLE VII: AUTHORIZED MEMBER

The name and address of each person authorized to manage and control the LLC:

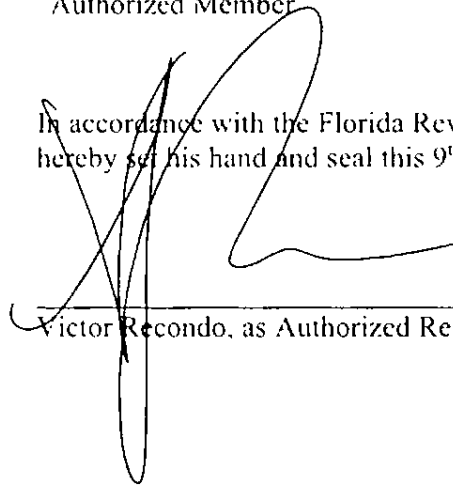
Title:

Name and Address:

Authorized Member

RF 160 NW 28 ST LLC  
2999 NE 191 Street, Suite 800  
Aventura, Florida 33180

In accordance with the Florida Revised Limited Liability Company Act, the undersigned as hereby set his hand and seal this 9<sup>th</sup> day of March, 2023.

  
\_\_\_\_\_  
Victor Recondo, as Authorized Representative

FILED  
2023 MAR 14 AM 9:04  
SECRETARY OF STATE  
TALLAHASSEE, FL