La3000138798

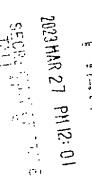
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



400404662174

S. CHATHAM MAR L1 2023



RECEIVED

2023 MAR 27 AH 11: 19

Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE: 611039 AUTHORIZATION : COST LIMIT : \$ 155.00 ORDER DATE: March 24, 2023 ORDER TIME : 9:17 AM ORDER NO. : 611039-005 CUSTOMER NO: 7555686 DOMESTIC FILING NAME: MULBERRY INVESTMENTS LLC EFFECTIVE DATE: ____ ARTICLES OF INCORPORATION _ CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: XX____ CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CORPORATION SERVICE COMPANY

CONTACT PERSON: Eyliena Baker - EXT.

1201 Hays Street

Tallhassee, FL 32301

			COVER LETT	TER	
	w Filing Sec vision of Cor				
SUBJECT:	Mulberry I	nvestments LLC			
SOBJECT.	Name of Limited Liability Company				
The enclose	d Articles of	Organization and fee(s) are submitted	for filing.	
Please retur	n all corr e spo	ondence concerning thi	s matter to the f	ollowing:	
	Travis Allen				
			Name of	Person	
			Firm/Co	mpany	
	45 Carmine	Street, Apt. 2D			
			Addre	ess	
	New York, N	iew York 10014			
	rovicallen019	@gmail.com	City/State and	d Zip Code	
		E-mail address: (to be	used for future a	nnual report notificat	
For further in	formation co	ncerning this matter, p	lease call:	·	•
•	Travis Allen	21	813 . (451-5012	
-	Nam	e of Person	Area Code	Daytime Telephor	ne Number
Enclosed is	a check for th	ne following amount:			
□\$125.001	Filing Fee	☐\$130.00 Filing Fe Certificate of Status	Certifie	5.00 Filing Fee & cd 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

Mulben	ry Investments LLC		
	(Must conatin the words "Limited Liabil	ty Company, "L.L.C.," or "LLC.")	
ARTICLE II - Ad			
The mailing addres	s and street address of the principal office of	f the Limited Liability Company is:	
	Principal Office Address:	Mailing A	ddress:
226 Syc	Iney Ln., Redington Shores, FL 33708	226 Sydney Ln.	
		D 1' + C' C1 226	
	gistered Agent, Registered Office, & Re		
(The Limited Liabil another business en	egistered Agent, Registered Office, & Registered Agent, Registered Office, & Registry Company cannot serve as its own Registration.) Florida street address of the registered agent	gistered Agent's Signature: tered Agent. You must designate an	~
(The Limited Liabil another business en	lity Company cannot serve as its own Regis ntity with an active Florida registration.) Florida street address of the registered agen William Allen	gistered Agent's Signature: tered Agent. You must designate an are:	individual or TALL SECRETAR 27
(The Limited Liabil another business en	lity Company cannot serve as its own Regis ntity with an active Florida registration.) Ilorida street address of the registered agen	gistered Agent's Signature: tered Agent. You must designate an are:	individual or TALL SECRETAR 27
(The Limited Liabil another business en	lity Company cannot serve as its own Regis ntity with an active Florida registration.) Florida street address of the registered agen William Allen	gistered Agent's Signature: tered Agent. You must designate an are:	individual or TALL SECRETAR 27
(The Limited Liabil another business en	lity Company cannot serve as its own Registity with an active Florida registration.) Florida street address of the registered agen William Allen Nam	gistered Agent's Signature: tered Agent. You must designate an are:	secretary P
(The Limited Liabil another business en	lity Company cannot serve as its own Registity with an active Florida registration.) Florida street address of the registered agentual William Allen Name 226 Sydney Ln.	gistered Agent's Signature: tered Agent. You must designate an are:	SECILE ARY OF STATE

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..

William Allen

١٧

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Member "MGR" = Manager	
-	To 2. All
	Travis Allen 45 Carmine Street, Apt. 2D
-	New York, New York 10014
•	THE TOTAL THE TOTAL TOTAL
-	
•	
	
	
	SECRE VIEW OF STALL STAL
	ACC H
	二二
	7-2
	· · · · · · · · · · · · · · · · · · ·
All constants and	<u> </u>
(Use attachment if necessary)	- Table 1
were that the end of the leading of the end	ling: (OPTIONAL)
*CLE. V: Effective date, it office than the date of it	
	c and cannot be more than five business days prior to or 90 days after
ate of filing.)	the applicable statutory filing requirements, this date will not be listed
ocument's effective date on the Department of St	
ocument's effective date on the Department of St	rate's records.
ICLE VI: Other provisions, if any.	
TODE 111 Guide provisional in any	
	· · · · · · · · · · · · · · · · · · ·
	· · · · · · · · · · · · · · · · · · ·
REOUIRED SIGNATURE:	
/~	- 11/Cm
Signature of a membe	er or an authorized representative of a member.
	n accordance with section 605.0203 (1) (b), Florida Statutes.
	ormation submitted in a document to the Department of State
	ony as provided for in s.817.155, F.S.
	•
*** * A 8 1	
Travis Allen	yped or printed name of signee

Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)