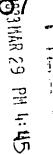
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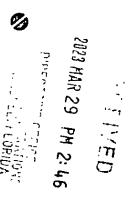
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COVER LETTER

	ew Filing Sectivision of Co			
SUBJECT	AKFL 7 L	LC		
30001.01	•	Name of L	Limited Liability Company	
The enclos	sed Articles of	Organization and fee(s)	are submitted for filing.	
Please retu	ırn all correspo	ondence concerning this	matter to the following:	
	Jackie Billa	rd		
			Name of Person	
	ArentFox So	chiff LLP		
			Firm/Company	<u> </u>
	800 Boylsto	n Street, 32nd Floor		
		<u>-</u>	Address	
	Boston, MA	. 02199		
	inskia hillard	@afslaw.com	City/State and Zip Code	
	 	-	ed for future annual report notificat	ion)
For further i	nformation co	oncerning this matter, ple	ase call:	
	Nan	at (ne of Person	Area Code Daytime Telephon	
Enclosed is	s a check for t	he following amount:		
□\$125.00) Filing Fee	☐\$130.00 Filing Fee Certificate of Status	& =\$155.00 Fiting Fee & Certified Copy (additional copy is enclosed)	☐S160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
		ng Address	Street Address	totato
	Divisi	filing Section on of Corporations	New Filing Section D The Centre of Tallah	assee
	P.O. I:	3ox 6327	2415 N. Monroe Stre	et, Suite 810

Tallahassee, FL 32314

Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	AKFL 7 LLC				
	(Must contai	n the words "Limited	Liability Company, "	L.L.C.," or "LLC.")	
	E II - Address: ing address and street add	lress of the principal c	office of the Limited I	Liability Company is:	
	<u>Principal</u>	Office Address:		Mailing Add	ress:
	9705 COLLINS AVE, #1901-N		9705	9705 COLLINS AVE, #1901-N	
	BAL HARBOUR, FL 33154 BAL HARBOUR, FL 331:		HARBOUR, FL 33154		
					
	.E III - Registered Agen iited Liability Company c				dividual or
	ousiness entity with an act			ca masc designate an in	
The name	e and the Florida street ad	ldress of the registered	d agent are:		20 SE
		Alan Kestenbaum			2023 MAR 29 SECTOMORY SECTION
		Man Resicioadin	Name		MR.
		9705 COLLINS AV	F #1901-N		- 29 F
			ss (P.O. Box NOT ac	ceptable)	P
		Bal Harbour	Florida	33154	BH 4:45
		City	State	Zip	5 5
		O.I.,			
Having bed	en named as registered ag	,	ice of process for the	above stated limited liah	
place desig	en named as registered ag gnated in this certificate. I	ent and to accept serv hereby accept the app	ointment as registere	d agent and agree to act	oility company at the in this capacity. I
place desig further agr	en named as registered ag znated in this certificate, I ree to comply with the pro r with and accept the obli	ent and to accept serv hereby accept the app visions of all statutes r	ointment as registered telating to the proper of	d agent and agrec to act and complete performan	oility company at the in this capacity. I uce of my duties, and I
place desig further agr	gnated in this certificate, I see to comply with the pro-	ent and to accept serv hereby accept the app visions of all statutes r	ointment as registered telating to the proper of	d agent and agrec to act and complete performan	oility company at the in this capacity. I uce of my duties, and I
place desig further agr	gnated in this certificate, I see to comply with the pro-	ent and to accept serv hereby accept the app visions of all statutes r gations of my position	ointment as registered telating to the proper of	d agent and agrec to act and complete performan s provided for in Chapte	oility company at the in this capacity. I uce of my duties, and I

(CONTINUED)

Title: "AMBR" = Authorized Member	Name and Address:	S S	2023
"MGR" = Manager MGR	AKSEM LLC 9705 COLLINS AVE, #1901-N BAL HARBOUR, FL 33154	- <u> </u>	2023 HAR 29
		 .	St :: 15
(Use attachment if necessary)			
CLE V: Effective date, if other than the date effective date is listed, the date must be specifically. If the date inserted in this block does not cument's effective date on the Departmen	pecific and cannot be more than five bus meet the applicable statutory filing requi	siness days prior to or 90 d	

REQUIRED SIGNATURE:



Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Alan Kestenbaum

Typed 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)