11-Apr-2023 11:17

4/11/23, 11:14 AM



## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H23000135016 3)))



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Division of Corporations

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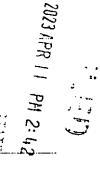
\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: DESTRIN@NYWINLAW.COM

# FLORIDA LIMITED LIABILITY CO.

S3N Marine 1, LLC

| Certificate of Status | ı        |
|-----------------------|----------|
| Certified Copy        | 0        |
| Page Count            | 03       |
| Estimated Charge      | \$130.00 |



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Help

H23000135016

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

# ARTICLE I - Name: The name of the Limited Liability Company is: S3N Marine 1, LLC (Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.") ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 3716 NE 168th Street, 407 North Miami Beach, FL 33160 North Miami Beach, FL 33160

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

| Daniel Estrin                    |         |          |  |
|----------------------------------|---------|----------|--|
| Name                             |         |          |  |
| 3716 NE 168th Street, 40         | 7       |          |  |
| Florida street address (P.O. Box | NOT acc | eptable) |  |
| North Miami Beach                | FL      | 33160    |  |
| City                             |         | Zip      |  |

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.

# Pauiel Estriu Registered Agent's Signature (REQUIRED) Daniel Estrin (CONTINUED)

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| <u>Title:</u> "AMBR" = Authorized Member   | Name and Address:  |  |  |  |                            |
|--|--|--|--|--|----------------------------|
| "MGR" = Manager AMBR   | Daniel Estrin  |  |  |  |                            |
| AMBR   | 3716 NE 168th Street, 407 North Miami Beach, FL 33160 Alexey Mishchenko 1830 S Ocean Drive, 1205   |  |  |  |                            |
|  |  |  |  |  | Hallandale Beach, FL 33009 |
|  |  |  |  |  |                            |
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| TITLE STOCKSBOLL BACKCOM/I   |  |  |  |  |                            |
| fective date is listed, the date must be   | date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 90  |  |  |  |                            |
| LE V: Effective date, if other than the officient date is listed, the date must be of filling.)  | date of filing: (OPTIONAL) e specific and cannot be more than five business days prior to or 90  |  |  |  |                            |
| LE V: Effective date, if other than the offective date is listed, the date must be of filing.)   |  |  |  |  |                            |
| LE V: Effective date, if other than the offective date is listed, the date must be of filing.)  LE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a  | Dauiel Estriu  member or an authorized representative of a member.   |  |  |  |                            |
| LE V: Effective date, if other than the offective date is listed, the date must be of filing.)  LE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a (In accordance with sectionstitutes an affirmation I am aware that any false)  | Dauiel Estriu  member or an authorized representative of a member.   |  |  |  |                            |
| LE V: Effective date, if other than the of fective date is listed, the date must be of filing.)  LE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a (In accordance with sectionstitutes an affirmation I am aware that any false) | Daulel Estriu  member or an authorized representative of a member. ion 605.0203 (1) (b), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true, the information submitted in a document to the Department of State. |  |  |  |                            |