L23000174252

(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



600405993876

PILED

2023 APR II PH 1: 31

SECICIARY BEATTY
ALLAHASSEE ET STATT



CT CORP

3458 Lakeshore Drive, Tallahassee, FL 32312 850-656-4724

04/11/2023

D	ate:	04/11/2023	_
		Acc#I20160000072	- w: ()>W
Name:	10550 Dee	rwood Park, LLC	
Document #:			
Order #:	14883487 -	. 1	
Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of Apostille/Notarial Certification:		Country of Destination: Number of Certs:	
Filing: 🗸	Certified	: 🗸	Email Address for Annual Report Notifications:
	Plain: COGS:		debbie.davis@johnstonewaregroup
Availability Document Examiner Updater Verifier W.P. Verifier Ref#	.Amount:	\$ 155.00	

Thank you!

COVER LETTER

	Sew Filing Se Division of Co				
SUBJECT	10550 Dec	erwood Park, LLC			
30Banc i	' ·	Name of Lin	nited Liability	Company	
The enclos	sed Articles of	f Organization and fee(s) are	submitted for	r filing.	
Please retu	ım all corresp	ondence concerning this ma	itter to the foll-	owing:	
	Christopher	Ware			
			Name of Pe	rson	
			Firm/Comp	any	
	11710 Cent	ral Parkway			
			Address		
	Jacksonville	e. FL 32224			
	debbie.davis(C @johnstonewaregroup.com	ity/State and Z	ip Code	
		E-mail address: (to be used	for future anni	ual report notificat	ion)
For further i	nformation co	ncerning this matter, please	call:		
	Debbie Davi	s 90 at (759-1144	
	Nan			Daytime Telephon	e Number
Enclosed is	s a check for t	he following amount:			
□\$125.00	Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certified (☐\$160.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed)
	<u>Mailir</u>	ng Address	Str	eet Address	

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
10550 Decrwood Park, LLC
(Must contain 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:

11710 Central Parkway	11710 Central Parkway
Jacksonville, FL 32224	Jacksonville, FL 32224

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:

CT Corporation S	ystem	
	Name	
1200 South Pine Isl	and Road	
Florida street addre	ss (P.O. Box <u>NOT</u> a	ecceptable)
Plantation	FL	33324
City	State	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..

David Westcott Asst. Secty.

Registered Agent's Signature (REQUIRED)

(CONTINUED)



ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager MGR Christopher Ware 11710 Central Parkway Jacksonville, FL 32224 (Use attachment if necessary) **ARTICLE V:** Effective date, if other than the date of filing: ___ _. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. REOUIRED SIG DocuSigned by: Christopher Ware JCANFFA10E9440C aer 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

Filing Fees:

Typed or printed name of signee

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

constitutes a third degree felony as provided for in s.817.155, F.S.

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

Christopher Ware