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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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## FLORIDA LIMITED LIABILITY CO.

## SAVANNAH INVESTMENTS 2023 LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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Help

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	ty Company is:			
	STMENTS 2023 LLC	Tightility Come	iny, "L.L.C.," or "LLC.")	
(Music Colle	am me words Diffilled	Liability Compt	my, L.L.C., or "LLC.")	
ARTICLE II - Address:	•			
The mailing address and street a	ddress of the principal o	office of the Lim	ited Liability Company is:	
Princip	al Office Addrem:		! Malling Address:	
8500 WEST FLAGL MIAMI, FL 33144	ER ST STE B208		3500 WEST FLAGLER ST STE B2 MIAMI, FL 33144	.08
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	cannot serve as its own	Registered Age	Agent's Signature: nt. You must designate an individus	d or
The name and the Florida street	address of the registered	d agent are:		
	MIGUEL A. HERNA	ANDEZ, CPA		
		Name	·	
	8500 WEST FLAGL	BR ST STE D2	08	
	Plorida street addres	s (P.O. Box <u>NO</u>	T acceptable)	
	MIAMI	FT.	. 33144	
	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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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. . . .

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Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	FLORIDA PREMISES LLC 8500 WEST FLAGLER ST STE B208 MIAMI, FL 33144
(Use attachment if necessary) "LE V: Effective date, if other than the da	ste of filing:
LE V: Effective date, if other than the da ffective date is listed, the date must be see of filing.)	ate of filing:
LE V: Effective date, if other than the da ffective date is listed, the date must be see of filing.) If the date inserted in this block does not ument's effective date on the Department	t meet the applicable statutory filing requirements, this date will not be list
LE V: Effective date, if other than the da ffective date is listed, the date must be s e of filing.) If the date inserted in this block does not ument's effective date on the Department	t meet the applicable statutory filing requirements, this date will not be list
LE V: Effective date, if other than the da ffective date is listed, the date must be s e of filing.) If the date inserted in this block does not ument's effective date on the Department LE VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a r This document is exect I am aware that any ful	t meet the applicable statutory filing requirements, this date will not be list