

May. 1. 2023 11:57AM

No. 0253 P. 1

5/1/23, 11:11 AM

L23000214931

Florida Department of State
Division of Corporations
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To:

Division of Corporations
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From:

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Account Number : I19990000255
Phone : (561)844-3700
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Email Address: Kyle@taiter.com

RECEIVED

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CORPORATIONS
COMMERCIAL
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FLORIDA LIMITED LIABILITY CO.

Taiter Realty, LLC

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

2023 MAY -1 PM 2:15

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No. 0253 P. 2

DocuSign Envelope ID: E4BE81F4-0FF1-4D6E-9D8C-8D0C185BCA59

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Taiter Realty, 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:

1090 Jupiter Park Dr., Suite 101
Jupiter, FL 33458

1090 Jupiter Park Dr., Suite 101
Jupiter, FL 33458

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:

Kyle Camerlinck

Name

1090 Jupiter Park Dr., Suite 101

Florida street address (P.O. Box **NOT** acceptable)

Jupiter

FL

33458

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.

Decubigned by.

Kyle Camerlinck

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

MGR

Kyle Camerlinck
1090 Jupiter Park Dr., Suite 101
Jupiter, FL 33458

MGR

Robert Camerlinck
1090 Jupiter Park Dr., Suite 101
Jupiter, FL 33458

(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.

REQUIRED SIGNATURE:

DocuSign by:

Kyle Camerlinck
002242118267481

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.

Kyle Camerlinck, Manager

Typed or printed name of signer

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)

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