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To:

Division of Corporations

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: (850)617-6381

From:

Account Name : GERALD WEINBERG, P.C.

Account Number : I20030000043 Phone : (800)342-9856

Fax Number

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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 1	Address			

FLORIDA LIMITED LIABILITY CO. **BACKDOORCUT, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

_	BACKE	OORCUT, LLC		
(Must contain t		Liability Company, "	L.L.C.," or "LLC.")	
CLE II - Address:				
illing address and street address	as of the principal o	ffice of the Limited I	iability Company is:	
Principal O	ffice Address:		Mailing Address:	
5300 PINE TREE DRIVE	В	5300	5300 PINE TREE DRIVE	
MIAMI BEACH, FL 331	40		MIAMI BRACH, FL 33140	
CLE III - Registered Agent, I	Registered Office,	& Registered Agent Registered Agent, Y		
ELE III - Registered Agent, I mited Liability Company can business entity with an active	Registered Office, not serve as its own e Florida registratio	& Registered Agent Registered Agent. Y n.)	's Signature:	
ELE III - Registered Agent, I mited Liability Company can business entity with an active me and the Florida street addre	Registered Office, not serve as its own e Florida registratio ess of the registered	& Registered Agent Registered Agent. Y n.) agent are:	's Signature:	
CLE III - Registered Agent, I mited Liability Company can business entity with an active me and the Florida street address	Registered Office, not serve as its own e Florida registratio	& Registered Agent Registered Agent. Y n.) agent are:	's Signature:	
CLE III - Registered Agent, I imited Liability Company can business entity with an active me and the Florida street address.	Registered Office, not serve as its own e Florida registratio ess of the registered	& Registered Agent Registered Agent Y n.) agent are: BERG Name	's Signature:	
CLE III - Registered Agent, I imited Liability Company cans business entity with an active me and the Florida street address A	Regutered Office, not serve as its own e Florida registrations of the registered NDREW S. GOLD	& Registered Agent Registered Agent Y n.) agent are: BERG Name	's Signature: ou must designate an individual o	
CLE III - Registered Agent, I imited Liability Company came business entity with an active me and the Florida street address A	Regutered Office, not serve as its own e Florida registrations of the registered NDREW S. GOLD	& Registered Agent Registered Agent Y n.) agent are: BERG Nome	's Signature: ou must designate an individual o	

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.

(CONTINUED)

Registered Agen's Signature (REQUIRED)

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:
<u>AMBR</u>	Andrew S. Goldberg Lytrt dtd07/19/18 5300 Pine Tree Drive Miami Beach, Florida 33140
ambr	Paul Goldstein 345 W. 13th Street. Apt., 2F New York. New York 10014
	
(II an effective date is listed, the date must be sp the date of filing.)	e of filing: (OPTIONAL) secific and cannot be more than five business days prior to or 90 days after meet the applicable statutory filing requirements, this date will not be listed as of State's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	Lanene a Kisch
Signature of a m	ember or an authorized representative of a member

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.

LAWRENCE A. KIRSCH

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)