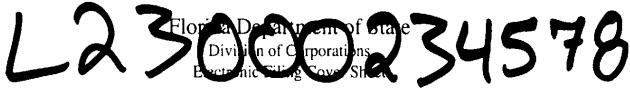
Division of Corporations



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Division of Corporations

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From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC. 05/12/2023

Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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

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FLORIDA LIMITED LIABILITY CO.

1826 Collins Acquisition II LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$130.00

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ARTICLE I - Name:				
The name of the Limited Liab	oility Company is:			
100 C C III . 1	stable a WIII O			
1826 Collins Acqu (Must co	ontain the words "Limited	Liability Company, "I	L.C," or "LLC.")	_
·				
ARTICLE II - Address: The mailing address and stree	t address of the principal of	office of the Limited L	iability Company is:	
THE HINTING BOOLESS WITH SALAS	a national art are bringer by			
Princ	cipal Office Address:		Malling Address:	
9455 Collins Ave		225 C	rossways Park Drive	
שיא מונונונוט כניייל	·			_
# 502			bury, NY 11797	-
# 502 Surfaide, FL 3315	4	Wood	bury, NY 11797	- - -
# 502 Surfaide, FL 3315	Agent, Registered Office, any cannot serve as its own an active Florida registrations address of the registere	Wood & Registered Agent Registered Agent. Yeon.)	bury, NY 11797	_
# 502 Surfside, FL 3315 ARTICLE III - Registered A (The Limited Liability Companother business entity with a	Agent, Registered Office, any cannot serve as its ow an active Florida registrati	Wood & Registered Agent Registered Agent. Ye on.) d agent are:	bury, NY 11797 's Signature:	-
# 502 Surfside, FL 3315 ARTICLE III - Registered A (The Limited Liability Companother business entity with a	Agent, Registered Office, any cannot serve as its own an active Florida registrations address of the registere	Wood & Registered Agent Registered Agent. Yeon.)	bury, NY 11797 's Signature:	-
# 502 Surfside, FL 3315 ARTICLE III - Registered A (The Limited Liability Companother business entity with a	Agent, Registered Office, any cannot serve as its own an active Florida registrations address of the registere Alex Solovey 9455 Collins Ave, #	Wood & Registered Agent Registered Agent. Ye on.) d agent are: Name	bury, NY 11797 's Signature: ou must designate an individual or	-
# 502 Surfside, FL 3315 ARTICLE III - Registered A (The Limited Liability Companother business entity with a	Agent, Registered Office, any cannot serve as its own an active Florida registrations address of the registere Alex Solovey 9455 Collins Ave, #	Wood & Registered Agent. Yeon.) d agent are:	bury, NY 11797 's Signature: ou must designate an individual or	- -
# 502 Surfside, FL 3315 ARTICLE III - Registered A (The Limited Liability Companother business entity with a	Agent, Registered Office, any cannot serve as its own an active Florida registrations address of the registere Alex Solovey 9455 Collins Ave, #	Wood & Registered Agent Registered Agent. Ye on.) d agent are: Name	bury, NY 11797 's Signature: ou must designate an individual or	 - -

Having been named as registered agent and to accept service of process for the above stated timited that it is company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I 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)

ARTICLE IV-

<u>Title:</u>	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager	
MGR	Mendy Chudaitov 9455 Collina Ave., Apt. 302
	Surfside, FL 33154
MGR	Alex Solovey
	Crossways Park Dr. Woodbury, NY 11797
	у доарду, 10 1 11777
AMBR	PDD Holdings, LLC
WARDE	223 Crosswaya Park Dr.
	Woodbury, NY 11797
AL COD	BND Holdings, LLC
AMBR	225 Crossways Park Dr.
	Woodbury, NY 11797
(Use attachment if necessary) CLE V: Effective date, if other than the	he date of filing: (OPTIONAL)
CLE V: Effective date, if other than the free five date is listed, the date must be of filling.) If the date inserted in this block does	es not meet the applicable statutory filing requirements, this date will not be li
CLE V: Effective date, if other than the factor of the date is listed, the date must	es not meet the applicable statutory filing requirements, this date will not be in
CLE V: Effective date, if other than the frective date is listed, the date must be of filling.) If the date inserted in this block document's effective date on the Department's Other provisions, if any	es not meet the applicable statutory filing requirements, this date will not be lis
CLE V: Effective date, if other than the frective date is listed, the date must be of filling.) If the date inserted in this block does current's effective date on the Department's effective date on the Department.	es not meet the applicable statutory filing requirements, this date will not be lightened of State's records.
CLE V: Effective date, if other than the ffective date is listed, the date must be of filling.) If the date inserted in this block does current's effective date on the Dopas CLE VI: Other provisions, if any. REQUIRED SIGNATURE:	es not meet the applicable statutory filing requirements, this date will not be lightened of State's records.
CLE V: Effective date, if other than the ffective date is listed, the date must be of filling.) If the date inserted in this block does current's effective date on the Dopas CLE VI: Other provisions, if any. REQUIRED SIGNATURE:	of a member or an authorized representative of a member.
CLE V: Effective date, if other than the ffective date is listed, the date must be of filling.) If the date inserted in this block does current's effective date on the Dopas CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature This document is	es not meet the applicable statutory filing requirements, this date will not be lightened of State's records.
CLE V: Effective date, if other than the ffective date is listed, the date must be of filling.) If the date inserted in this block does current's effective date on the Dopas CLE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature This document is	of a member or an authorized representative of a member. s executed in accordance with section 605.0203 (1) (b), Florida Statutes. my false information submitted in a document to the Department of State d degree felony as provided for in s.817.155, F.S.

\$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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AMBR

Lefferts Holdings, LLC

9455 Collins Ave., Apt. 502

Surfside, FL 33154

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2023 HAY 1.1 PNK 3: