# 133000293537

	_
(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:	
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Office Use Only



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SECRETARY OF STATE

2023 JUN 19 PM 9: 14

2923 JII- 19 AH 10: 25

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

Pnone: 850-558-1500					
ACCOUNT NO. : I2000000195					
REFERENCE : 820548 109203A					
AUTHORIZATION :					
COST LIMIT: \$ 125.00					
ORDER DATE : June 16, 2023					
ORDER TIME : 9:32 AM					
ORDER NO. : 820548-010					
CUSTOMER NO: 109203A					
DOMESTIC FILING					
NAME: TH 3786 PROPERTY LLC					
EFFECTIVE DATE:					
ARTICLES OF INCORPORATION					
CERTIFICATE OF LIMITED PARTNERSHIP  XX ARTICLES OF ORGANIZATION					
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:					
CERTIFIED COPY					
XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING					
CONTACT PERSON: Eyliena Baker - EXT.					
EXAMINER'S INITIALS:					

# COVER LETTER

	New Filing S Division of C	Section Corporations				
SHRIFC		6 PROPERTY LLC				
SUBJECT:Name of Limited Liability Company						
The enclo	osed Articles	of Organization and fee(s	) are submitte	d for filing.		
Please ret	urn all corre	spondence concerning this	matter to the	following:		
	STEVEN	R AMSTER, ESQ.				
		_	Name o	f Person		
	KODSI L	AW FIRM PA				
			Firm/C	ompany		
	1000 N HIATUS ROAD, SUITE 103					
			Add	ress		
	PEMBRO	OKE PINES, FL 33026				
	samster@	kodsilawfirm.com	City/State a	nd Zip Code		
		<u> </u>	sed for future	annual report notification)		
For further	information	concerning this matter, pl	ease call:			
	Steven	at	954	771-8277 ext 111		
	N	ame of Person	Area Code	Daytime Telephone Number		
Enclosed	is a check to	r the following amount:		Daytime Telephone Number  STOCKET AND STOC		
	Filing Fee	\$130.00 Filing Fee & Certificate of Status	└── Certif	vo rining ree &     3100.00 rining ree.		
Mailing Address  New Filing Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314			Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

TH 3786 PROPERTY LLC	
(Must contain the words "Limited Liabi	ility Company, "E.L.C.," or "LLC.")
RTICLE II - Address: he mailing address and street address of the principal office	of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
Principal Office Address:  3786 NE 167 STREET # 49	Mailing Address: 3786 NE 167 STREET #49

The name and the Florida street address of the registered agent are:

HAREL BITTON				
Nan	ne			
3904 NE 167	7 STREET			
Florida street address (P.O. Box NOT acceptable)				
NORTH MIAMI BEACH, FL		33160		
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..

By Hard Bitton
Registered Agent's Signature (REQUIRED)

(CONTINUED)



ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	OMER BEN HAMU 366 VANMULLIGAN AVE LAS VEGAS, NV 89183-4218
(No ottocker ant if a green and	
he date of filing.)	I cannot be more than five business days prior to or 90 days after pplicable statutory filing requirements, this date will not be listed as
ARTICLE VI: Other provisions, if any.	
<u>REQUIRED</u> SIGNATURE:  Sleven R. Am	ster

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.

STEVEN R. AMSTER, AUTHORIZED PERSON

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)