200039655

(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:

Office Use Only

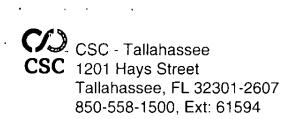


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2029 JUN 21 AM IJ: 15

RECEIVED

TANFETARY OF STATE



To: Department Of State, Division Of Corporations

From: Eyliena Baker

Ext: 61594 Date: 06/21/23 Order #: 1227447-1

Re: Awbury Analytics LLC Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Certificate of Formation/Incorporation

Expulsible man

Amount to be deducted from our State Account: \$125.00 - FL State Account Number:

120000000195

auth

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO:	New Filing Se Division of Co			
SUBJI	Awbury A	Analytics LLC		
30 .0 0.		Name of	Limited Liability Company	
The en	nclosed Articles of	f Organization and fee(s)	are submitted for filing.	
		ondence concerning this		
	Alex Dubits	sky		
			Name of Person	
	Awbury An	alytics LLC		
			Firm/Company	
	1000 SE Mo	onterey Commons Bivd,	Suite 202	
			Address	
	Stuart, FL 34	1996		
			City/State and Zip Code	
	E	E-mail address: (to be use	d for future annual report notificat	ion)
For furthe	er information cor	ncerning this matter, plea	se call:	
	Alex Dubitsky		,	
	Name	of Person ,	Area Code Daytime Telephon	e Number
Enclosed	d is a check for th	e following amount:		
□ \$ 125.	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	☐\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed),
		Address	Street Address	ORE I
	Division P.O. Bo	ing Section n of Corporations x 6327	New Filing Section Div The Centre of Tallaha 2415 N. Monroe Stree	ssee

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Awbury Analytics	s LLC		
(Must co	onatin the words "Limited	Liability Con	npany, "L.L.C.," or "LLC.")
ARTICLE II - Address:			
The mailing address and stree	t address of the principal	office of the L	imited Liability Company is:
Princ	cipal Office Address:		Mailing Address:
1000 SE Monterey Stuart, FL 34996	y Commons Blvd, Suite 2	02	1000 SE Monterey Commons Blvd, Suite 202
ARTICLE III - Registered A	INVICATION SERVE AS ITS AWE	Renictared A	Stuart, FL 34996 Agent's Signature:
ARTICLE III - Registered A (The Limited Liability Compa another business entity with a	ny cannot serve as its own n active Florida registration	Registered A	
ARTICLE III - Registered A (The Limited Liability Compa another business entity with a	ny cannot serve as its own n active Florida registration et address of the registered	Registered A on.) I agent are:	A America City
ARTICLE III - Registered A (The Limited Liability Compa another business entity with a	ny cannot serve as its own n active Florida registration	Registered A on.) I agent are:	A America City
ARTICLE III - Registered A (The Limited Liability Compa another business entity with a	ny cannot serve as its own n active Florida registration et address of the registered	Registered A on.) I agent are: Company	A America City
ARTICLE III - Registered A (The Limited Liability Compa another business entity with a	ny cannot serve as its own n active Florida registration active Florida registered et address of the registered Corporation Service	Registered A on.) d agent are: Company Name	Agent's Signature: gent. You must designate an individual or
ARTICLE III - Registered A	ny cannot serve as its own active Florida registration active Florida registered et address of the registered Corporation Service 1201 Hays Street	Registered A on.) d agent are: Company Name	Agent's Signature: gent. You must designate an individual or

place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I t service of process for the above stated limited liability company at the 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..

Corporation Service Company

By

Another Vischhole W

Registered Agent's Signature (REQUIRED)

(CONTINUED)

"AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR and AMBR	Alex Dubitsky 148 S. Sewalls Point Road Sewall's Point, FL 34996
AMBR	Andrew Kaplan 31 Burnham Hill Westport CT 06880
Use attachment if necessary)	
V: Effective date, if other than the date tive date is listed, the date must be saffling.) The date inserted in this block does not	pecific and cannot be more than five business days prior to or 90 meet the applicable statutory filing requirements, this date will not
V: Effective date, if other than the date tive date is listed, the date must be s filing.) ne date inserted in this block does not ent's effective date on the Departmen VI: Other provisions, if any.	meet the applicable statutory filing requirements, this date will not to of State's records.
V: Effective date, if other than the date tive date is listed, the date must be similarly filling.) he date inserted in this block does not ent's effective date on the Departmen VI: Other provisions, if any.	meet the applicable statutory filing requirements, this date will not tof State's records.
V: Effective date, if other than the date tive date is listed, the date must be so filing.) The date inserted in this block does not ent's effective date on the Department VI: Other provisions, if any. EOUIRED SIGNATURE: Signature of a material This document is executed an aware that any false.	meet the applicable statutory filing requirements, this date will not to of State's records.
V: Effective date, if other than the date tive date is listed, the date must be so filing.) The date inserted in this block does not ent's effective date on the Department VI: Other provisions, if any. EOUIRED SIGNATURE: Signature of a man This document is executed a man aware that any false constitutes a third degree.	meet the applicable statutory filing requirements, this date will not to of State's records. ember or an authorized representative of a member. ted in accordance with section 605.0203 (1) (b), Florida Statutes.

ARTICLE IV-

PILED
2023 JUH 21 MM 2: 42
SEGRETARY OF STATE
TALLAHASSEE, FATE