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(Re	questor's Name)	
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(City	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
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(Doc	cument Number)	
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Account#: 120000000088

Date:07/	25/2023	
Name:	Chris Vick	
Reference #:	2071927	
Entity Name:	ADAM PAI	RKER MAKANI LLC
✓ Articles of	Incorporation/Authorization	on to Transact Business
Amendme	nt	
Change of	f Agent	
Reinstater	ment	
Conversio	n	
Merger		
☐ Dissolutio	n/Withdrawal	
☐ Fictitious I	Name	
✓ Other	CERTIF	TIED COPY UPON FILING
Authorized Amou	int: \$155.00	

F: 800.944.6607

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Account#: 120000000088

Date:	07/25/2023	
Name:_	Chris Vick	_
Referen	nce #: 2071927	
Entity N	ame: ADAM PAR	KER MAKANI LLC
V A	Articles of Incorporation/Authorization	to Transact Business
A	Amendment	
	Change of Agent	
□ F	Reinstatement	
	Conversion	
□ v	Merger	
	Dissolution/Withdrawal	
□ F	ictitious Name	
V	Other CERTIFIE	D COPY UPON FILING
Authoriz Signatu	zed Amount: \$155.00	

COVER LETTER

TO: New Filing Section

Division of C	orporations			
SUBJECT:	Adam P	arker Mak	ani LLC	
NOBSECT:	Name of Lir	mited Liabi	lity Company	
The enclosed Articles	of Organization and fee(s) at	re submitted	I for filing.	
Please return all corres	spondence concerning this m	atter to the	following:	
		Adam N		
		Name of	l Person	
		Makani	Market	
		Firm/Co	ompany	
		7251 Vall	ey Court	
		Add	ress	
	New	Port Rich	ey, FL 34653	
	(Tity/State ar	nd Zip Code	
	adar	m@makan	imarket.com	
	E-mail address: (to be used	f for future	annual report notific	ation)
For further information	concerning this matter, pleas	se call:		
A	dam Makani at (_	508	335-	7485
N:	ime of Person A	Area Code	Daytime Teleph	one Number
Enclosed is a check fo	r the following amount:			
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	Certif	00 Filing Fee & ied Copy nal copy is enclosed)	\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
New Divi P.O.	ling Address Filing Section sion of Corporations Box 6327 ahassee, FL 32314		Street Address New Filing Section Division of Corpor Clifton Building 2661 Executive Ce	nter Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		ker Makani LLC	<u> </u>		
(Must contain	the words "Limited Liab	oility Company, "L.L	.C.," or "L.L.C.")		
ARTICLE II - Address:					
The mailing address and street address	ress of the principal office	e of the Limited Liab	ility Company is:		
Principal	Office Address:		Mailing Address:		
7251 V-	alley Court		7251 Valley Cout		
		-	7251 Valley Cout		
ARTICLE III - Registered Agent (The Limited Liability Company ca	innot serve as its own Re	Registered Agent's S			
ARTICLE III - Registered Agent The Limited Liability Company ca another business entity with an act	t. Registered Office, & Finnot serve as its own Relive Florida registration.)	Registered Agent's S gistered Agent. You r	ignature:		
ARTICLE III - Registered Agent (The Limited Liability Company ca another business entity with an act	t. Registered Office, & Funnot serve as its own Regive Florida registration.) dress of the registered agreement of the registered agreement.	Registered Agent's S gistered Agent. You r ent are:	ignature:		
ARTICLE III - Registered Agent (The Limited Liability Company ca another business entity with an act	t, Registered Office, & Finnot serve as its own Regive Florida registration.) dress of the registered ag	Registered Agent's S gistered Agent. You r ent are:	ignature:		
ARTICLE III - Registered Agent (The Limited Liability Company ca another business entity with an act	t, Registered Office, & Finnot serve as its own Regive Florida registration.) dress of the registered ag	Registered Agent's S gistered Agent. You r ent are:	ignature:		
ARTICLE III - Registered Agent (The Limited Liability Company ca another business entity with an act	t, Registered Office, & Finnot serve as its own Regive Florida registration.) dress of the registered age	Registered Agent's S gistered Agent. You r ent are:	ignature:		
ARTICLE III - Registered Agent (The Limited Liability Company ca another business entity with an act	t, Registered Office, & Finnot serve as its own Regive Florida registration.) dress of the registered age	Registered Agent's S gistered Agent. You r ent are: dam Makani ame	ignature: nust designate an individual o		
ARTICLE III - Registered Agent (The Limited Liability Company ca another business entity with an act The name and the Florida street ade	t, Registered Office, & Funnot serve as its own Register Florida registration.) dress of the registered again for the registered again.	Registered Agent's S gistered Agent. You r ent are: dam Makani ame	ignature: nust 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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

21120 - 2 P

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А	к	H	()	. .	IV-

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

<u>Title</u> "AM	: BR" = Authorized	Name and Address: Member
	R" = Manager	
	MGR	Adam Makani
		7251 Valley Court
		New Port Richey, FL 34653
	AMBR	Katia Hummel
		7251 Valley Court
		New Port Richey, FL 34653
		
(Use	attachment if nece	ssary)
an effective date of fili ote: If the d	e date is listed, the ng.) late inserted in this	ther than the date of filing:
	: Other provisions.	
REO	This do I am ay	gnature of a member or an authorized representative of a member, cument is executed in accordance with section 605.0203 (1) (b), Florida Statutes, are that any false information submitted in a document to the Department of State tes a third degree felony as provided for in s.817.155, F.S.
	_	Adam Makani
	•	Typed or printed name of signee
		Ellian V

<u>Filing Fres:</u>

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)