

L23000353306

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

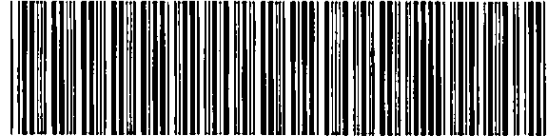
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com
e-mail: accounting@incserv.com

incserv

ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau
mmoreau@incserv.com
850.656.7953

REQUEST DATE 7/26/2023

PRIORITY Regular Approval

OUR REF # (Order ID#) 1167484

ORDER ENTITY
GRANDSCAPE TENT LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

GRANDSCAPE TENT LLC (FL)

Please file the attached articles and provide a certified copy.

NOTES:

\$155.00 Authorized

Email address for annual report reminders: brucelazarus2020@gmail.com /

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

**ARTICLES OF ORGANIZATION FOR FLORIDA
LIMITED LIABILITY COMPANY**

ARTICLE I - NAME

The name of the Limited Liability Company is Grandscape Tent LLC.

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Company is 2365 Sailfish Cove Drive, West Palm Beach, FL 33411.

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S
SIGNATURE**

The name of the registered agent of the Company at that address is Bruce Lazarus. The street address of the registered office of the Company is 2365 Sailfish Cove Drive West Palm Beach, Florida, 33411.

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 a registered agent as provided for in Chapter 605, F.S.

By: /s/ Bruce Lazarus
Registered Agent's Signature
Dated: July 25, 2023

ARTICLE IV - MANAGEMENT

The Company is to be managed by His Story Development LLC, its Authorized Member and the managing member of the Company. The name and address of the Authorized Member, which is authorized to manage and control the Company, is as follows:

His Story Development LLC, Authorized Member
2365 Sailfish Cove Drive, West Palm Beach, FL 33411

SIGNATURE:

His Story Development LLC, Authorized Member

/s/ Bruce Lazarus

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 penalty as provided for in s.817.155, F.S.

By: Bruce Lazarus, Authorized Representative of Evergreen Five LLC,
Managing Member of His Story Development LLC
Dated: July 24, 2023

Typed or printed name of signee: Bruce Lazarus

Email: brucelazarus2020@gmail.com

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