L23000363305

	(Requestor's Name)	
	(Address)	<u>. </u>
 -	(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



800412853158



CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

-		
1081 SINGER DR I	LLC	 ,
Please Debit FCA000	0000003 For: 125	
Thank you Seth Nee	ley	
1-4-7	·	
- Hely		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art. of Amend. File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
,		Officer Search
1		Fictitious Search
		Fictitious Owner Search
Signature		Vehicle Search
		— — Driving Record
Requested by: SETH		UCC 1 or 3 File
		UCC 11 Search
Name	Date Time	UCC 11 Retrieval
Walk-In	Will Pick Up	Courier

ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY.

The name of the Limited Liability	Company is:			
1081 Singer Dr LLC				
	in the words "Limited I	Liability Com	pany, "L.L.C.," or "LLC.")	_
ARTICLE II - Address: The mailing address and street ad	dress of the principal o	ffice of the Li	nited Liability Company (5)	
Principa	l Office Address:		Mailing Address:	
1190 Morse Blvd. Riv	riera Beach, FL 33404		1190 Morse Blvd. Riviera Beach, Ff 3340	14
				_
ARTICLE III - Registered Ages (The Limited Liability Company) another business entity with an ad- The name and the Florida street as	rannot serve as its own rtive Florida registratio	Registered Ag n.)	gent. You must designate an individual or	
	1190 Marse Blvd.			
	Florida street address	(P.O. Box X	IT acceptable)	
	Riviera Beach	FJ.	33404	
	City	State	Zip	
place designated in this cortifleate, I further agree to comply with the pro	hereby accept the appo visions of all statutes re	untment as reg lating to the pi	or the above stated limited liability company istered agent and agree to act in this capacity oper and complete performance of my duties gent as provided for in Chapter 605, F.S	e Z

(CONTINUED)

ARTICLE IV-

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

"MGR" = Manager	······································	
AMBR	Paul Befanis 1190 Morse Blvd, Riviera Beach, Fl. 33404	
		
(Use attachment if necessary)		
	et the applicable stantory filing requirements, this date wil	!! not be liv
If the date inserted in this block does not med ocument's effective date on the Department of	et the applicable statutory filing requirements, this date will State's records.	ll not be fis
If the date inserted in this block does not medocument's effective date on the Department of CLE VI: Other provisions, if any.	et the applicable statutory filing requirements, this date wil State's records.	
Elf the date inserted in this block does not medocument's effective date on the Department of ICLE VI: Other provisions, if any.	State's records.	
Elf the date inserted in this block does not mee ocument's effective date on the Department of CLE VI: Other provisions, if any. REOURED SIGNATURE:	State's records.	
ELEVI: Other provisions, if any. REOUIRED SIGNATURE: Signature of a member of a manual am aware that any fulse in	State's records.	les.
REOURED SIGNATURE: Signature of a member of a manufacture of a manufactur	ber or an authorized representative of a member. In accordance with section 605.0203 (1) (b). Florida Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document submitted in a	des.
ELEVI: Other provisions, if any. REOURED SIGNATURE: Signature of a member of a manufacture of a manufactur	ber or an authorized representative of a member. In accordance with section 605.0203 (1) (b). Florida Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document to the Department of Statution submitted in a document submitted in a	les.
REOURED SIGNATURE: Signature of a member of a massing decented by the constitutes a third degree ference of the Department of the Departm	ber or an authorized representative of a member. In accordance with section 605,0203 (1) (b). Florida Statution submitted in a document to the Department of Schony as provided for in s.847,155, F.S. Typed or printed name of signee	des.
REOURED SIGNATURE: Signature of a member of a manual transport of	ber or an authorized representative of a member. In accordance with section 605,0203 (1) (b). Florida Statution submitted in a document to the Department of Schony as provided for in s.847,155, F.S. Typed or printed name of signee Filing Fees:	des.
REOUIRED SIGNATURE: Signature of a member of a may fulse in constitutes a third degree fee Paul Befanis S125.00 Filing Fee for Articles of Organ	ber or an authorized representative of a member. In accordance with section 605,0203 (1) (b). Florida Statution submitted in a document to the Department of Schony as provided for in s.847,155, F.S. Typed or printed name of signee	2023 · ·
REOURED SIGNATURE: Signature of a member of a manual transport of	ber or an authorized representative of a member. In accordance with section 605,0203 (1) (b). Florida Statu dormation submitted in a document to the Department of Sciony as provided for in 8,817,155, F.S. Typed or printed name of signee Filing Fees: nization and Designation of Registered Agent	es. rate 2023 · · ·