

L23000387951

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:  
Division of Corporations  
Fax Number : (850)617-6381

From:  
Account Name : RABIDEAU KLEIN  
Account Number : I20200000035  
Phone : (561)655-6221  
Fax Number : (561)655-3221

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: GRABIDEAU@RABIDEAUKLEIN.COM

FLORIDA LIMITED LIABILITY CO.  
CARLYLE BEACH HOUSE 101, LLC

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$160.00

RECEIVED  
AUG 17 PM 12:24

FILED  
AUG 17 PM 12:24

COVER LETTER

TO: New Filing Section  
Division of Corporations

SUBJECT: CARLYLE BEACH HOUSE 101, LLC  
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

GUY RABIDEAU  
Name of Person  
RABIDEAU KLEIN  
Firm/Company  
440 ROYAL PALM WAY, SUITE 101  
Address  
PALM BEACH, FL 33480  
City/State and Zip Code  
GRABIDEAU@RABIDEAUKLEIN.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

GARRETT ELLIS                      561                      655-6221  
Name of Person                      Area Code                      Daytime Telephone Number

Enclosed is a check for the 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)

Mailing Address  
New Filing Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

Street Address  
New Filing Section Division  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

CARLYLE BEACH HOUSE 101, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

2778 S. OCEAN BOULEVARD  
#108-N  
PALM BEACH, FL 33480

2778 S. OCEAN BOULEVARD  
#108-N  
PALM BEACH, FL 33480

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

GUY RABIDEAU

Name

440 ROYAL PALM WAY, SUITE 101

Florida street address (P.O. Box **NOT** acceptable)

PALM BEACH                      FL                      33480

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.*



Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED  
2023 AUG 17 PM 12:24  
TALLAHASSEE, FL 32301

**ARTICLE IV-**

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

**Title:**

**Name and Address:**

"AMBR" = Authorized Member

"MGR" = Manager

MGR

SWEET MASTER, LLC  
2778 S. OCEAN BOULEVARD, #108-N  
PALM BEACH, FL 33480

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(Use attachment if necessary)

**ARTICLE V:** Effective date, if other than the date of filing: \_\_\_\_\_ (OPTIONAL)

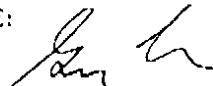
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**REQUIRED SIGNATURE:**



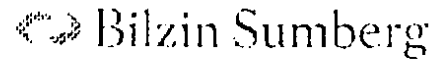
Signature of a member or an authorized representative of a member.  
This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.  
I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

GUY RABIDEAU

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)



**FAX COVER SHEET**

**Deliver To:** Division of Corporations  
**Company:**  
**Fax Number:** 1-850-617-6381

**CC:**

**Date:** Thursday, August 17, 2023 4:06:20 PM

**Total Pages:** 04

**From:** Vanessa Valledares

**Client/Matter:** 305052

Please deliver this information immediately upon receipt to the person named above. If you do not receive all the pages, please call Bilzin Sumberg at (305) 374-7580

**Comments:**

**Call us at 305.374.7580 if you have any difficulties with this transmission.**

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