L23000416309

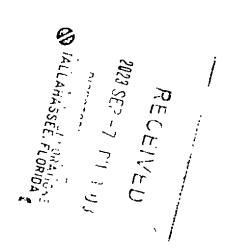
	(Requestor's Name)	
	(Address)	
	(Address)	
	(City/State/Zip/Phone #)	
PICK-UP	WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
Certified Copies		Status
Special Instructions to	Filing Officer:	

Office Use Only



200415232162

09/08/23--0109;--010 **250.00



5025

CORPORATE ACCESS, _____

When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

WALK IN

	PICK	UP: BROOK 9/7
XX	CERTIFIED COPY PHOTOCOPY	
	GS	***
XX	FILING	LLC
1.	JBL WINTER PARK (CORPORATE NAME AND DOCU	
2.	(CORPORATE NAME AND DOCU	(MEN'T #)
3.	CORPORATE NAME AND DOCO.	WIEINT #)
.	(CORPORATE NAME AND DOCU	MENT#)
-	(CORPORATE NAME AND DOCU	MENT #)
-	(CORPORATE NAME AND DOCUME	MENT #)
j .	(CORPORATE NAME AND DOCUME	MENT #)
PECIAI NSTRU	CTIONS:	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
JBL Winter Park Outparcel HZ, 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 <u>Principal Office Address</u> :	the Limited Liability Company is: Mailing Address:
2028 Harrison Street, Suite 202	2028 Harrison Street, Suite 202
Hollywood, FL 33020	Hollywood, FL 33020
ARTICLE III - Registered Agent, Registered Office, & Regist (The Limited Liability Company cannot serve as its own Registe another business entity with an active Florida registration.)	

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

IBL Asset Management, LLC

Name

2028 Harrison Street, Suite 202

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

Hollywood FL 33020

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)

ARTICLE IV-

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

"AMBR" = Au		
"MGR" = Man		
MGR	•	gob Vhotavali 2039 Harrison Carres Suit 203
NUN		cob Khotoveli - 2028 Harrison Street, Suite 202 Mywood, FL 33020
	<u></u>	
		
	_	
(Use attachmer	t if necessary)	
fective date is list of filing.)	ted, the date must be specific a	g: (OPTIONAL) nd cannot be more than five business days prior to or 90 day applicable statutory filing requirements, this date will not be
fective date is list of filing.) If the date inserte	ted, the date must be specific a	nd cannot be more than five business days prior to or 90 days applicable statutory filing requirements, this date will not be
fective date is list of filing.) If the date inserted iment's effective out.	ted, the date must be specific and in this block does not meet the date on the Department of State visions, if any.	nd cannot be more than five business days prior to or 90 days applicable statutory filing requirements, this date will not be e's records.
fective date is list of filing.) If the date inserted iment's effective out.	ted, the date must be specific and in this block does not meet the date on the Department of State visions, if any.	nd cannot be more than five business days prior to or 90 days applicable statutory filing requirements, this date will not be
fective date is list of filing.) If the date inserted iment's effective of the pro-	ted, the date must be specific and in this block does not meet the date on the Department of State visions, if any.	nd cannot be more than five business days prior to or 90 days applicable statutory filing requirements, this date will not be e's records.
fective date is list of filing.) If the date inserted iment's effective out.	ted, the date must be specific and in this block does not meet the date on the Department of State visions, if any.	nd cannot be more than five business days prior to or 90 days applicable statutory filing requirements, this date will not be e's records.
fective date is list of filing.) If the date inserted iment's effective of the pro-	d in this block does not meet the date on the Department of State visions, if any. IGNATURE:	applicable statutory filing requirements, this date will not be a records.
fective date is list of filing.) If the date inserted iment's effective of the pro-	d in this block does not meet the date on the Department of State visions, if any. IGNATURE: Signature of a prember of	e applicable statutory filing requirements, this date will not be e's records.
fective date is list of filing.) If the date inserted iment's effective of the pro-	d in this block does not meet the date on the Department of State visions, if any. IGNATURE: Signature of a prember of This document is executed in a	e applicable statutory filing requirements, this date will not be e's records. Or an authorized representative of a member. ecordance with section 605.0203 (1) (b). Florida Statutes.
fective date is list of filing.) If the date inserted iment's effective of the pro-	d in this block does not meet the date on the Department of State visions, if any. IGNATURE: Signature of a member of This document is executed in a 1 am aware that any false inform	e applicable statutory filing requirements, this date will not be e's records.
fective date is list of filing.) If the date inserted iment's effective of the pro-	d in this block does not meet the date on the Department of State visions, if any. IGNATURE: Signature of a member of This document is executed in a 1 am aware that any false inform constitutes a third degree felony	e applicable statutory filing requirements, this date will not be e's records. or an authorized representative of a member. ecordance with section 605.0203 (1) (b), Florida Statutes, nation submitted in a document to the Department of State
fective date is list of filing.) If the date inserted iment's effective of the pro-	d in this block does not meet the date on the Department of State visions, if any. IGNATURE: Signature of a member of This document is executed in a 1 am aware that any false inform constitutes a third degree felony. Jacob Khotoveli	e applicable statutory filing requirements, this date will not be e's records. or an authorized representative of a member. ecordance with section 605.0203 (1) (b), Florida Statutes, nation submitted in a document to the Department of State
fective date is list of filing.) If the date inserted ins	d in this block does not meet the date on the Department of State visions, if any. IGNATURE: Signature of a prember of this document is executed in a 1 am aware that any false inform constitutes a third degree felony. Jacob Khotoveli Type	e applicable statutory filing requirements, this date will not be e's records. or an authorized representative of a member. ecordance with section 605.0203 (1) (b), Florida Statutes, nation submitted in a document to the Department of State or as provided for in s.817.155, F.S.
fective date is list of filing.) If the date inserted ins	d in this block does not meet the date on the Department of State visions, if any. IGNATURE: Signature of a prember of a management of a management of a prember of a management of a prember of a management of a prember	e applicable statutory filing requirements, this date will not be e's records. or an authorized representative of a member. ecordance with section 605.0203 (1) (b), Florida Statutes, nation submitted in a document to the Department of State or as provided for in s.817.155. F.S.
Sective date is list of filing.) If the date inserted ment's effective of the property of the	d in this block does not meet the date on the Department of State visions, if any. IGNATURE: Signature of a prember of this document is executed in a 1 am aware that any false inform constitutes a third degree felony. Jacob Khotoveli Type	e applicable statutory filing requirements, this date will not be e's records. or an authorized representative of a member. ecordance with section 605.0203 (1) (b), Florida Statutes, nation submitted in a document to the Department of State or as provided for in s.817.155, F.S.