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ONEWAY RESORT CELEBRATION LLC	`I
Please Debit FCA00000003 For: 125	
Thank you Seth Neeley	
Stal	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
1 .	Officer Search
	Fictitious Search
Signature	Fictitious Owner Search
	Vehicle Search
	Driving Record
Requested by: SETH	UCC 1 or 3 File
Name Date Time	UCC 11 Search
	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

# COVER LETTER

	ew Filing Sec vision of Co					
OVID VD COT		RESORT CELE	BRATIO	N LLC		
SUBJECT:	·	Nai	me of Lin	nited Liabil	ity Company	<del></del>
The enclose	ed Articles of	Organization and	fee(s) are	e submitted	for filing.	
Please retur	n all correspo	ondence concernit	ng this ma	tter to the	following:	
	ALEX D. SI	RULNIK				
				Name of	Person	
	ALEX D. SI	RULNIK, P.A.				
		<del>-</del> .		Firm/Co	mpany	
	2199 PONC	E DE LEON BOU	JLEVAR	D, SUITE	301	
		<del></del>		Addr	ess	
	CORAL GA	BLES, FL 33134				
· T	nis@siriii	NIKLAW.COM	С	ity/State an	d Zip Code	
_		<del></del> .	be used	for future a	unnual report notificat	ion)
For further in:	formation co	ncerning this matt	er, please	call:		
1	ALEX D. SII	RULNIK	30		443-7211	
_	Nam	e of Person	at ( Ar	ea Code	Daytime Telephon	e Number
Englaced is	n check for th	ie following amoi	.m*:			
置\$125.00 I		□\$130.00 Filir Certificate of S	ıg Fee &	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New Fi Divisio P.O. Bo	g Address ling Section n of Corporations ox 6327 assec, FL 32314	;		Street Address New Filing Section D The Centre of Tallaha 2415 N. Monroe Stre Tallahassee, FL 3230	assee et, Suite 810

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ONEWAY RESORT					
(Must contai	n the words "Limited Li	ability Company,	"L.L.C.," or "LLC.")		
ARTICLE II - Address:					
The mailing address and street add	iress of the principal off	ice of the Limited	Liability Company is:		
<u>Principal</u>	Office Address:		Mailing Address:		
1915 HARRISON STE	REET	<u>191</u>	5 HARRISON STREET		
2ND FLOOR		2NI	2ND FLOOR		
HOLLYWOOD, FL 32	3020	HO	HOLLYWOOD, FL 33020		
(The Limited Liability Company coanother business entity with an act The name and the Florida street ad	tive Florida registration.	egistered Agent. )	nr's Signature: You must designate an individual or		
(The Limited Liability Company of another business entity with an act	annot serve as its own R tive Florida registration. dress of the registered a ALEX D. SIRULNIK,	egistered Agent. ) gent are: P.A.	You must designate an individual or		
(The Limited Liability Company of another business entity with an act	annot serve as its own R tive Florida registration. dress of the registered a ALEX D. SIRULNIK,	egistered Agent. ) gent are:	You must designate an individual or		
(The Limited Liability Company of another business entity with an act	annot serve as its own R tive Florida registration. dress of the registered a ALEX D. SIRULNIK,	egistered Agent. ) gent are: P.A. Name	You must designate an individual or		
(The Limited Liability Company of another business entity with an act	annot serve as its own R tive Florida registration. dress of the registered a ALEX D. SIRULNIK,	egistered Agent. ) gent are: P.A. Name	You must designate an individual or		
(The Limited Liability Company contains another business entity with an act.)  The name and the Florida street ad.	annot serve as its own R tive Florida registration. dress of the registered a ALEX D. SIRULNIK,	egistered Agent. ) gent are: P.A. Name	You must designate an individual or		
(The Limited Liability Company control another business entity with an act.)  The name and the Florida street ad.	annot serve as its own R tive Florida registration. dress of the registered a ALEX D. SIRULNIK,  2199 PONCE DE LEO Florida street address (	egistered Agent. ) gent are: P.A. Name N BOULEVARI P.O. Box NOT a	You must designate an individual or  O, SUITE 301  cceptable)		

(CONTINUED)

Registered Agent's Signature (REQUIRED)

1030c7 4 M 3.35

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	TIBER SERVICES LLC 1915 HARRISON STREET, 2ND FLOOR HOLLYWOOD, FL 33020
<del></del> _	
(Use attachment if necessary)	
effective date is listed, the date must be ite of filing.)	date of filing:
CLE VI: Other provisions, if any.	ent of State's records.
REQUIRED SIGNATURE:	to the second se
This document is exe I am aware that any f	member or an authorized representative of a member. ecuted in accordance with section 605.0203 (1) (b), Florida Statutes. alse information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.
	Description, and historian section of the control o

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)

### Article VI:

The Limited Liability Company is authorized to issue two (2) classes of membership, which shall be Class A Non-Voting members (the "Class A Members") and Class B Voting members (the "Class B Members"). The rights, preferences, and privileges of the Class A Members and the Class B Members shall be identical, except that the Class A Members shall not be entitled to vote on any matter required to be approved by, or submitted for approval of, the members.