L23000459942

(Requestor's Name)		
(Ac	idress)	
DA)	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	L WAIT	MAIL
(Bu	isiness Entity Nar	me)
(24	omess chilly har	110)
		·
(Do	cument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	

Office Use Only



300416565023

OC1 - 8 2023

2 112 5-10 2 12:11

2012: 19

23 OCT -6 AM 9: 5

30CT -6 AM 9: 53

Incorporating Services, Ltd.

1540 Glenway Drive Tallahassee, FL 32301 850.656.7956

Fax: 850.656.7953 www.incsenz.com



ORDER FORM

TO Florida Department of State **FROM**

Melissa Moreau

The Centre of Tallahassee 2415 North Monroe Street, Suite 810

Tallahassee, FL 32303

corphelp@dos.myflorida.com

850-245-6051

850.656.7953

REQUEST DATE 10/6/2023

PRIORITY Regular Approval

OUR REF # (Order ID#) 1182379

ORDER ENTITY

VACATION RENTAL BUILDERS & CO. LLC

PLEASE PERFORM THE FOLLOWING SERVICES:

VACATION RENTAL BUILDERS & CO. LLC (FL)

Please file the attached articles and provide a certified copy.

NOTES:

\$155.00 Authorized

RETURN/FORWARDING INSTRUCTIONS:

ACCOUNT NUMBER: 120050000052

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 1 - Name:

	l Builders & Co. LLC contain the words "Limited Lic	ability Company, "	L.L.C" or "LLC.")	
ARTICLE II - Address:				
	eet address of the principal offi	ce of the Limited I.	iability Company is:	
Principal Office Address:			Mailing Address:	
1951 NE 191 Drive, North Miami Beach, FL 33179.		179. 1951 NE	1951 NE 191 Drive, North Miami Beach, FL 3317	
-				
The name and the Florida s	treet address of the registered a	gent are:		-
The name and the Florida s	Sheldon Pearce	gent are:		- - ان
The name and the Florida s	Sheldon Pearce			
The name and the Florida s	Sheldon Pearce	dame	reptable)	
The name and the Florida s	Sheldon Pearce	dame	reptable)	
The name and the Florida s	Sheldon Pearce 1951 NE 191 Drive Florida street address (Name P.O. Box <u>NOT</u> acc	•	1-5 [312: 19

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Joshua Hanif 14705 NE 11 Ct, Miami, FL 33161
MGR	Sheldon Pearce 1951 NE 191 Drive, North Miami Beach, FL 33179
(Use attachment if necessary)	
(If an effective date is listed, the date must be spec the date of filing.)	of filing:
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	
	/ Joshua Hanif
This document is execute I am aware that any false	nber or an authorized representative of a member, d in accordance with section 605.0203 (1) (b). Florida Statutes, information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.
<u>Joshua Hanif</u>	Typed or printed name of signee

as

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)