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(.	Requestor's Name)	 -
(,	Address)	
(,	Address)	- · -
	City/State/Zip/Phone #)	
,	City/Otate/Zip/miotie #)	
PICK-UP	WAIT	MAIL
(Business Entity Name)	
(Document Number)	
Certified Copies	_ Certificates o	f Status
	<u> </u>	_
Special Instructions to F	Filing Officer:	

Office Use Only



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S. CHATHAM

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FIALLAHASSEPPOSATIONS

Fil 5: 55

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312
(850) 656-4724

DATE10/12/2023	**WALK IN
ENTITY NAME 2939 S	Haverhill Rd Opco LLC
DOCUMENT NUMBER	
	PLEASE FILE THE ATTACHED AND RETURN
XXXXXXX	Plain Copy
	Certified Copy
	Certificate of Status
,	**PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**
	Certified Copy of Arts & Amendments
	Certified Copy of Arts & Amendments Complete File (Including Annual Reports)
**************************************	Certificate of Status
	Certificate of Status Reflecting:
	APOSTILLE' / NOTARIAL CERTIFICATION
COUNTRY OF DESTINA	TION
NUMBER OF CERTIFICA	ATES REQUESTED
TOTAL OWED \$ 125.0	ACCOUNT # 120160000072 4: C)
	ACCOUNT#120160000072 4: ACCOUNT#120160000072 4: Account#120160000072

ARTICLESOFORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

(Mus		39 S Haverhill Ro	l Opco LLC	
	t contain the words "Limited	Liability Company, "	L.L.C.," or "LLC.")	
RTICLE II - Address: ne mailing address and str	eet address of the principal of	Nice of the Limited L	iability Company is:	
<u>Pr</u>	Principal Office Address:		Mailing Address:	
338 WHITESV Jackson, NJ 083				
The first war and the first wa	-	et address of the registered agent are: Platinum Agent Services LLC Name		
	Platinum Agent Serv			
	Platinum Agent Serv 155 Office Plaza Dr			
	155 Office Plaza Dr		ceptable)	
	155 Office Plaza Dr	Name	ceptable)	

(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	FREUND, NATHAN
	338 WHITESVILLE ROAD Jackson, NJ 08527
	
	~
	no.

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	ン) - U)
(Use attachment if necessary)	
mach was productive days to advantage the d	ate of filing: (OPTIONAL)
an effective date is listed, the date must be date of filing.)	specific and cannot be more than five business days prior to or 90 days afto of meet the applicable statutory filing requirements, this date will not be listed
TICLE V1: Other provisions, if any.	
REQUIRED SIGNATURE:	
/S/ NATHA	AN FREUND
This document is exe I am aware that any fi	member or an authorized representative of a member. Ecuted in accordance with section 605.0203 (1) (b), Florida Statutes. Talse information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.
constitutes a tima dej	
NATHAN FR	

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)