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Florida Department of State  
Division of Corporations  
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To:

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From:

Account Name : THERREL BAISDEN, LLP  
Account Number : I20140000065  
Phone : (305)371-5758  
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**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: donnellyhouses@gmail.com

**FLORIDA LIMITED LIABILITY CO.**  
**419 E. 20th, LLC**

Certificate of Status	0
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Page Count	03
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ARTICLES OF ORGANIZATION  
FOR  
419 E. 20th, LLC

ARTICLE I  
Name

The name of the Limited Liability Company is 419 E. 20th, LLC.

ARTICLE II  
Address

The mailing address and street address of the principal office of the Limited Liability Company is: 90 Alton Road, Apt 2202, Miami Beach, FL 33139.

ARTICLE III  
Existence; Duration

This limited liability company shall have a perpetual existence, unless dissolved according to law, effective as of the 11th day of October, 2023.

ARTICLE IV  
Registered Agent

The street address of the initial registered office of the Limited Liability Company shall be Therrel Baisden LLP, SunTrust International Center, One S.E. 3rd Avenue, Suite 2950, Miami, Florida 33131, and the name of the initial registered agent of the Limited Liability Company at that address is: Jonathan Feuerman, Esq.

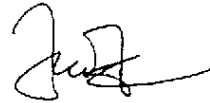
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**ARTICLE V**  
**Manager-Managed Company**

The Limited Liability Company is to be managed by one or more managers and is therefore a manager-managed company. The name and address of the initial managers of this corporation are: **TERENCE DONNELLY and JOAN DONNELLY**, both at: 90 Alton Road, Apt 2202, Miami Beach, FL 33139.

The undersigned authorized representative of the members of 419 E. 20th, LLC, hereby executes these articles of organization on this **11th** day of **October, 2023**.



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Jonathan Feuerman,  
authorized representative

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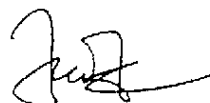
**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is **419 E. 20th, LLC.**
2. The name and the Florida street address of the registered agent and office are:

Jonathan Feuerman, Esquire  
Therrel Baisden LLP  
SunTrust International Center  
One S.E. 3rd Avenue, Suite 2950  
Miami, Florida 33131

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.



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Jonathan Feuerman