Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H23000367268 3)))



H230003672683A8C4

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : COMPUTERSHARE Account Number: 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:___

FLORIDA LIMITED LIABILITY CO. Redfearn Capital Holdings, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A E	TI	C1	FI	13	ia me

The name of the Limited Liability Company is:

DocuSign Envelope ID: F115672F-DAC1-4EFC-AB47-EF5665925AE4

Redfearn Capital Holdings, 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 the Limited Liability Company is:

Principal Office Address:

Mailing Address:

110 SE 2nd Street, Suite 101	110 SE 2nd Street, Suite 101	
Delray Beach, FL 33444	Delray Beach, FL 33444	

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Alexander P. Redfearn
Name

110 SE 2nd Street, Suite 101
Florida street address (P.O. Box NOT acceptable)

Troited street address (1.0. Dox Not acceptable)

Delray Beach FL 33444

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..

Merander P. Redfram

Registered Agent's Signature (REQUIRED)

(CONTINUED)

2023 OCT 20 AM IO: 38

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authori	Name and Address:	
"MGR" = Manager		
MGR	Alexander P. Redfearn	
	110 SE 2nd Street, Suite 101	
	Delray Beach, Fl. 33444	
<u> </u>		
(If an effective date is listed, the date of filing.) Note: If the date inserted in	if other than the date of filing:	-
ARTICLE VI: Other provisio	ns, if any.	
REOUIRED SIGN	Merander P. Redtearn	
l an	Signature of a member or an authorized representative of a member. It is document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. It is aware that any false information submitted in a document to the Department of State stitutes a third degree felony as provided for in s.817.155, F.S.	
	Alexander P. Redfearn	2
	Typed or printed name of signee	023
		

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)