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	(Requestor's Name)	
	(Address)	
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	(Mudiess)	
	(City/State/Zip/Phone #)	
	•	
PICK-UP	WAIT	MAIL
	(Business Entity Name)	
	(Document Number)	
	,,,	
Certified Copies	Certificates of St	latus
Special Instructions to	Filing Officer:	-
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1		

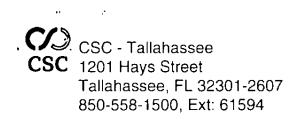




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- Fr: 3: 5:



To: Department Of State, Division Of Corporations

From: Eyliena Baker

Ext: 61594 Date: 11/02/23 Order #: 1305854-1

Re: 174 CARICA ROAD, LLC Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Certificate of Formation/Incorporation

Amount to be deducted from our State Account: \$155.00 - FL State Account Number:

Lynellelenan

12000000195

auth

Please take the following action:

File in your office on basis

Issue Proof of Filing Issue Certified Copy

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

COVER LETTER

TO:	New Filing Se Division of Co				
SUBJE		a Road, LLC			
0000		Nan	ne of Limited Lia	bility Company	
The en	closed Articles o	f Organization and	fee(s) are submit	ted for filing.	
Please	return all corresp	ondence concernin	g this matter to th	e following:	
	Brian A. Co	ordero			
			Name	of Person	
	Woods, We	eidenmiller, Michett	i & Rudnick. LL	P	
			Firm/	Company	
	9045 Strada	Stell Court, 4th Fl	oor		
			Ad	dress	
	Naples, FL	34109			
	bcordero@la	wfirmnaples.com	City/State	and Zip Code	
	-		be used for future	e annual report notificat	tion)
For furthe	er information co	oncerning this matte	r, please call:		
	Brian A. Cor	dero	239 _at (325-4070	
	Nam	ne of Person	Area Code	Daytime Telephor	ne Number
Enclose	d is a check for t	he following amour	ıt:		
_	.00 Filing Fee	□\$130.00 Filing Certificate of Sta	Fee & ■\$1 itus Certi	55.00 Filing Fee & fied Copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		g Address		Street Address	
		iling Section on of Corporations		New Filing Section De The Centre of Tallaha	
	P.O. B	ox 6327		2415 N. Monroe Stre	et, Suite 810
	P.O. B				et, Suite 810

The name of the Limited Lia	ability Company is:		
174 Carica Roac	LLC		
(Must	contain the words "Limited L	iability Company	, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and stre	et address of the principal of	fice of the Limited	d Liability Company is:
	ncipal Office Address:		Mailing Address:
<u>Pri</u>			
2951 Route 9W		295	1 Route 9W
2951 Route 9W New Windsor, N RTICLE III - Registered The Limited Liability Comp	Y 12553 Agent, Registered Office, &	Nev Registered Age Registered Agent.	1 Route 9W w Windsor, NY 12553 nt's Signature: You must designate an individual or
2951 Route 9W New Windsor, N RRTICLE III - Registered The Limited Liability Componition of the component of	Y 12553 Agent, Registered Office, & pany cannot serve as its own	Registered Age Registered Agent.	w Windsor, NY 12553
2951 Route 9W New Windsor, N RTICLE III - Registered The Limited Liability Componenther business entity with	Y 12553 Agent, Registered Office, & any cannot serve as its own lan active Florida registration	Registered Age Registered Agent. agent are:	w Windsor, NY 12553
2951 Route 9W New Windsor, N RRTICLE III - Registered The Limited Liability Componition of the component of	Agent, Registered Office, & any cannot serve as its own an active Florida registration ect address of the registered	Registered Age Registered Agent. 1.) agent are:	w Windsor, NY 12553
2951 Route 9W New Windsor, N ARTICLE III - Registered The Limited Liability Componenther business entity with	Agent, Registered Office, & any cannot serve as its own an active Florida registration ect address of the registered	Registered Age Registered Agent. agent are: ent, LLC Name	w Windsor, NY 12553
2951 Route 9W New Windsor, N ARTICLE III - Registered The Limited Liability Componenther business entity with	Y 12553 Agent, Registered Office, & Pany cannot serve as its own I an active Florida registration ect address of the registered WWMR Statutory Ag	Registered Age Registered Agent. i.) agent are: ent, LLC Name rt, 4th Floor	w Windsor, NY 12553 nt's Signature: You must designate an individual or
2951 Route 9W New Windsor, N RTICLE III - Registered The Limited Liability Componenther business entity with	Y 12553 Agent, Registered Office, & Pany cannot serve as its own I an active Florida registration ect address of the registered WWMR Statutory Agents 19045 Strada Stell Cour	Registered Age Registered Agent. i.) agent are: ent, LLC Name rt, 4th Floor	w Windsor, NY 12553 nt's Signature: You must designate an individual or

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: 'AMBR" = Authorized Member "MGR" = Manager MGR Joseph A. Bonura Jr. 2951 Route 9W New Windsor, NY 12553 Michael Bonura 2951 Route 9W MGR New Windsor, NY 12553 (Use attachment if necessary) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. REQUIRED SIGNATURE: - DocuSigned by: Michael Bonura Signature of a member or an all fauthorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S. Michael Bonura Typed or printed name of signee 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)