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.

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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 : OLIVE JUDD, P.A. Account Number : I20200000171 Phone : (954)334-2250 Fax Number : (888)503-5258

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

Email Address: rjudd@olivejudd.com

## FLORIDA LIMITED LIABILITY CO. MANN REALTY FLORIDA LLC

الخافظة المستحد المتحدد المتحرب البطران إفراء المتحرب المستحد المستحد المتحدث والمستحدث والمستحد	
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T. MATTHEWS

Electronic Filing Menu Corporate Filing Menu

Help

## (((H23000387753 3)))

### **COVER LETTER**

	filing Section on of Corporations			
SUBJECT:	IANN REALTY FLORIDA LLC	•		
SUBJECT: _		Limited Liabi	lity Company	<del></del>
The enclosed A	rticles of Organization and fee(s)	are submitte	for filing.	
Please return al	l correspondence concerning this	matter to the	following:	
RC	BERT B. JUDD, ESQ.			
مهابينيه		Name o	f Person	-
OL	IVE JUDD, P.A.			
		Firm/C	отралу	<u> </u>
242	26 E. LAS OLAS BLVD			
		Add	ress	
FO	RT LAUDERDALE, FL 33301			
RJU	DD@OLIVEJUDD.COM	City/State a	nd Zip Code	
	E-mail address: (to be us	sed for future	annual report notification	on)
For further inform	mation concerning this matter, ple	ease call:		
RO	BERT B. JUDD, ESQ.	954	334-2250	
			Daytime Telephone	Number
Enclosed is a cl	heck for the following amount:			
<b>≣\$</b> 125.00 Fili	ng Fee ☐\$130.00 Filing Fee Certificate of Status	Certit	is 5.00 Filing Fee & fied Copy nal copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address  New Filing Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stree Tallahassee, FL 32303	ssee t. Suite 810

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# FILED

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

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· WILLT RY OF STATE
TALLAHASSEF FI

MANN REALTY FLORIDA 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:
3100 NORTH OCEAN BOULEVARD	3100 NORTH OCEAN BOULEVARD
SUITE 2810	SUITE 2810
FORT LAUDERDALE, FL 33308	FORT LAUDERDALE, FL 33308

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:

OLIVE JUDD, P.A.		
N	ime	
2426 E. LAS OLAS BL	۷D	
Florida street address (P	.O. Box <u>NO</u>	T acceptable)
FORT LAUDERDALE	FL	33301
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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

Page: 5 of 5

## (((H23000387753 3)))

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	MAURICE MANN
	3100 NORTH OCEAN BOULEVARD, SUITE 2810
	FORT LAUDERDALE, FL 33308
Has attual man if an annual	
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