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## **WALK IN**

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	Company is:			
437 Investments LLC				
(Must conta	n the words "Limited L	iability Com	pany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street add	dress of the principal of	fice of the Li	mited Liability Company is:	
<u>Principa</u>	Office Address:		Mailing Address:	
2232 N Cypress bend	Dr		2232 N Cypress bend Dr #304	_
Pompano Beach Fl 33	069		Pompano Beach Fl 33069	
ARTICLE III - Registered Ager (The Limited Liability Company of another business entity with an ac-	annot serve as its own I tive Florida registration	Registered A	Agent's Signature: gent. You must designate an individual or	
	Trevor Fey			
	-	Name		
	2232 N Cypress bend	Dr #304		
	Florida street address	(P.O. Box N	OT acceptable)	
	Pompano Beach	FL	33069	

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..

State

Zip

City

/S/ Trevor Fey
Registered Agent's Signature (REQUIRED)

(CONTINUED)

2620

he date inserted in this block does not meet the applicable statutory filing requirements, this date will not cent's effective date on the Department of State's records.  VI: Other provisions, if any.  EQUIRED SIGNATURE:  /S/ Laurie Fey  Signature of a member or an authorized 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.  Laurie Fey  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)	<u>Title:</u>	.1 1 134 1	Name and Address:
AMBR    Trevor Fey   301 Ne 31st street #709   Minmi Fl 33137     Laurie Fey   437 Ocean Avenue   Massapequa Park, NY 11762			
AMBR  Laurie Fey  437 Ocean Avenue  Massapequa Park, NY 11762  Use attachment if necessary)  V: Effective date, if other than the date of filing:  tive date is listed, the date must be specific and cannot be more than five business days prior to or 90 filing.)  tive date is listed, the date must be specific and cannot be more than five business days prior to or 90 filing.)  NI: Other provisions, if any.  EQUIRED SIGNATURE:  /S/ Laurie Fey  Signature of a member or an authorized 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.  Laurie Fey  Typed or printed name of signee  Filing Fees:  S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent	"MGR" = Ma	nager	
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