L23000528659

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(Bodument Number)
Certified Copies Certificates of Status
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COVER LETTER

	New Filing Sec Division of Co			
CHO IE/"		al Estate LLC		
SUBJEC	i:	Name of Limi	ited Liability Company	
The enclo	sed Articles of	Organization and fee(s) are	submitted for filing	
Please reti	urn all correspo	ondence concerning this mat	ter to the following:	
	Eddie		Sheely	
			Name of Person	
			Firm/Company	
	2308 nw 14t	n street		
	•		Address	
	Fort Lauderd	ale	FL	33311
	She	elye 441@ yo	ty/State and Zip Code \(\frac{1}{10} \) (1) (1) (2) (3) \(\text{for future annual report notificat} \)	ion)
For further	information co	ncerning this matter, please	call:	
	Eddic (at (4) at (4) Are	200 Paytime Telephor	S\S\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\
Enclosed	is a check for t	he following amount:		
#\$125.00	0 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	<u>Mailir</u>	<u>g Address</u>	Street Address	

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.") CLE II - Address: illing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address	Sheely Real Estate LLC							
iling address and street address of the principal office of the Limited Liability Company is:	*							
	F II - Address							
Principal Office Address: Mailing Addre	32 11 7 10 0 1 Co. 1.							
		f the Limited Liability Company is:						
2308 nw 14th street 2308 nw 14th street	ing address and street address of the principal office of	of the Limited Liability Company is: Mailing Address:						
	g address and street address of the principal office of Principal Office Address :	Mailing Address:						

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:

ARTICLE 1 - Name:

-	Name				
2308 nw 14th street					
Florida street addres	s (P.O. Box <u>NO</u>	[acceptable)			
ort Lauderdale	Florida	33311			
City	State	Zip			

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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-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address. "AMBR" = Authorized Member "MGR" = Manager (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: __. (OPTIONAL) (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:

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.

Eddie Sheely

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)