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HSI CBC, LLC		
DI DI I	125	
Please Debit FC	A000000003 For: 125	_
Thank you Seth	Neeley	
Stal		Art of Inc. File
		LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
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		RA Resignation
		Dissolution / Withdrawal
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		Certificate of Good Standing
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COVER LETTER

то:	New Filing Sec Division of Cor						
SUBJEC	HSFCBC,	LLC					
300017	Name of Limited Liability Company						
The enc	losed Articles of	Organization and fee(s) are	submitted	for filing.			
Please re	eturn all correspo	ondence concerning this ma	itter to the f	ollowing:			
	Gregory S. C	Propeza, Esq.					
			Name of	Person			
	Oropeza, Sto	ones & Cardenas, PLLC					
			Firm/Co	mpany			
	221 Simonto	n Street					
			Addr	ess			
	Key West, F	I. 33040					
	brianm.miller		ity/State an	d Zip Code			
		E-mail address: (to be used	for future a	nnual report notificati	on)		
For furthe	r information co	ncerning this matter, please	call:				
	Laura Bessor		5	294-0252			
	Nam			Daytime Telephon			
Enclosed	d is a check for t	ne following amount:					
	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	□\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
	New F Divisio P.O. B	g Address iling Section on of Corporations ox 6327 assec, FL 32314		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stree Tallahassee, FL 3230	assee et, Suite 810		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:					
the name of the Dinii	ted Liability Company is:				
1101 (11)	11.0				
HSI CBC.		U. C. C.	wit on a witon		
•	Must contain the words "Limited	i Liability Company,	"L.L.C., or "LLC.)		
ARTICLE II - Addre	P\$\$:				
, ,	nd street address of the principal	office of the Limited	Liability Company is:		
J					
	Principal Office Address:		Mailing Address:		
302 South	ard Street, Unit 207	c/o l	c/o High Seas Investments, LLC		
	FL 33040		1037 Chuck Dawley Blyd, STE F100		
		Mou	Mount Pleasant, SC 29464		
(The Limited Liability another business entit	stered Agent, Registered Office Company cannot serve as its ow y with an active Florida registrativities and active florida registered.	n Registered Agent. ion.)	nt's Signature: You must designate an individual or		
	Brian Miller				
	 	Name			
	302 Southard Street	, Unit 207			
	Florida street address (P.O. Box NOT acceptable)				
	Kev West	FL	33040		
	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..

Brian Miller

EBMETACCORAGE

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 AMBR High Seas Investments, LLC 1037 Chuck Dawley Blvd, STE F100 Mount Pleasant, SC 29464 (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 SIGNAGURE:

Brian Miller

EBF1512CFP614Fe 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.

Brian Miller, Manager

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)

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