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| (Requestor's Name)                       |  |  |  |
|--|--|--|--|
| (Address)                                |  |  |  |
| (Address)                                |  |  |  |
| (City/State/Zip/Phone #)                 |  |  |  |
| PICK-UP WAIT MAIL                        |  |  |  |
| (Business Entity Name)                   |  |  |  |
| (Document Number)                        |  |  |  |
| Certified Copies Certificates of Status  |  |  |  |
| Special Instructions to Filing Officer:  |  |  |  |
| Special instructions to Filling Officer. |  |  |  |

Office Use Only





115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

| Date: 12/20/2023                     |              | Account#: I20000000088  For any issues please contact Xavian Brown |  |
|--------------------------------------|--------------|--|--|
|                                      | Xavian Brown | 518-213-0739   |  |
| Reference #:                         | 2214918      |  |  |
|                                      | 6099 MAGGCIR | CLE 112, LLC   |  |
| ✓ Articles of  ☐ Amendme  ☐ Change o |              | ansact Business  |  |
| Reinstater                           | ment         |  |  |
| Conversio                            | n            |  |  |
| ☐ Merger                             |              |  |  |
| ☐ Dissolutio                         | n/Withdrawal |  |  |
| Fictitious I                         | Name         |  |  |
| Other                                |              |  |  |
| Authorized Amou                      | int:\$155.00 | _  |  |



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Account#: I20000000088

| Date: 12/20/2023   |                                 | For any issues please contact<br>Xavian Brown |  |
|--------------------|---------------------------------|---|--|
| Name: Xavian Brown |                                 | 518-213-0739                                  |  |
| Reference #:       | 2214918                         |   |  |
| Entity Name:       | 6099 MAGGCIF                    | RCLE 112, LLC                                 |  |
| ✓ Articles of I    | ncorporation/Authorization to T | ransact Business                              |  |
| Amendmen           | t                               |   |  |
| ☐ Change of        | Agent                           |   |  |
| Reinstatem         | ent                             |   |  |
| Conversion         |                                 |   |  |
| Merger             |                                 |   |  |
| ☐ Dissolution      | Withdrawal                      |   |  |
| ☐ Fictitious N     | ame                             |   |  |
| Other              |                                 |   |  |
|                    |                                 |   |  |
| Authorized Amour   | t:\$155.00                      | _   |  |
| Signature:         | ×Pm-                            | _   |  |

F: +852.2682.9790

# ARTICLES OF ORGANIZATION OF 6099 MAGGCIRCLE 112, LLC

The undersigned, being a duly authorized representative of the Member(s), desiring to form a limited liability company under and pursuant to the Florida Limited Liability Company Act, Chapter 605, Florida Statutes (the "Act"), does hereby adopt the following Articles of Organization:

# ARTICLE I. NAME

The name of the limited liability company is 6099 MaggCircle 112, LLC (the "Company").

# ARTICLE II. ADDRESS

The principal address of the Company is 6099 Maggies Circle, #112, Jacksonville, FL 32244 and the mailing address of the Company is 501 Knights Run Circle, Tampa, FL 33602.

#### ARTICLE III. REGISTERED AGENT AND OFFICE

The Company designates 115 North Calhoun Street, Suite 4, Tallahassee. FL 32301 as the street address of the initial registered office of the Company and names Cogency Global Inc. as the Company's initial registered agent at that address to accept service of process within this state.

### ARTICLE IV. DURATION AND CONTINUATION

The period of the Company's duration shall commence with the filing of these Articles of Organization with the Secretary of State, and shall continue perpetually, unless terminated in accordance with the Company's Operating Agreement or pursuant to the Act, as amended from time to time.

#### ARTICLE V. MANAGEMENT

The Company shall be conducted, carried on, and managed by at least one (1) Manager and is, therefore, a manager-managed Company. The name and address of the initial entity and person authorized to manage and control the Company are: #

| Title:            | Name and Address:                                       | 2023 |
|-------------------|---|------|
| Manager           | Solutionist Ventures, LLC<br>501 Knights Run Ave, #2319 | CD   |
|                   | Tampa. FL 33602   | ( )  |
| Authorized Person | Gary L. Flowers   |      |
|                   | 501 Knights Run Ave, #2319                              | ب-   |
|                   | Tampa. FL 33602   | , ω  |

# ARTICLE VII. PURPOSE

The purpose for which the Company is being formed is to engage in any activity or business permitted under the laws of the United States and the State of Florida including activities within the United States and abroad.

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IN WITNESS WHEREOF, the undersigned has hereunto set her hand and seal this 20th of December, 2023.

/s/ Kenny Jefferson

Kenny Jefferson,
Duly Authorized Representative of the
Member(s)

# ACCEPTANCE OF REGISTERED AGENT

The undersigned agrees to act as registered agent for 6099 MaggCircle 112. LLC to accept service of process at the place designated in these Articles of Organization, and to comply with the provisions of Chapter 605, Florida Statutes, and acknowledges that the undersigned is familiar with, and accepts, the obligations of such position on this 20th day of December, 2023.

Cogency Global Inc.

/s/ Eric Hood

By:\_\_

Name: Eric Hood

Title: Authorized Person

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T: 7:30