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2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-624 PLEASE USE FUNDS FROM THIS ACCOUNT: 120210000160: \$125.00 **AUTHORIZATION SIGNATURE:** 2380 CRESTON AVE. ASSOCIATES SE L.L.C. **BUSINESS** Document # Walk in ___ Pick up time____ Mail out Will wait Photocopy **Certified Copy** Certificate of Status **NEW FILINGS AMMENDMENTS** Profit Amendment Not for Profit Resignation of R.A. Officer/Director X Limited Liability Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger CORP Conversion **OTHER FILINGS** REGISTERATION/QUALIFICATIONS Annual Report ___ Foreign filing __Limited Partnership Fictitious Name Reinstatement APOSTIL () ______ Other Country

FLORIDA CAPITAL COURIER SERVICES, INC

:XAMINER'S INITIALS:____

TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-624 PLEASE USE FUNDS FROM THIS ACCOUNT: 120210000160: \$125.00 **AUTHORIZATION SIGNATURE:** 2380 CRESTON AVE. ASSOCIATES SE L.L.C. **BUSINESS** Document # Pick up time____ Walk in Mail out Will wait Photocopy Certified Copy Certificate of Status **NEW FILINGS** <u>AMMENDMENTS</u> Profit Amendment ____Resignation of R.A. Officer/Director Not for Profit X Limited Liability ____Change of Registered Agent Domestication Dissolution/Withdrawal Other Merger CORP Conversion OTHER FILINGS REGISTERATION/QUALIFICATIONS Annual Report ___ Foreign filing ____Limited Partnership Fictitious Name Reinstatement APOSTIL () ______ Other Country

FLORIDA CAPITAL COURIER SERVICES, INC

2330 CLARE DRIVE

XAMINER'S INITIALS:

COVER LETTER

TO: New Filing Section Division of Corporations			
2380 CRESTON AVE. ASS	OCIATES SE LLC		
SUBJECT: Nar	ne of Limited Liabili	ty Company	
The enclosed Articles of Organization and	fee(s) are submitted	for filing.	
Please return all correspondence concerning	ig this matter to the f	following:	
MARK ALBRIGHT, ESQ.			
 	Name of	Person	_
PERLMAN, BAJANDAS, YI	EVOLI & ALBRIGH	IT, P.L.	
, ,	Firm/Co	mpany	•
200 SOUTH ANDREWS AV	ENUE, SUITE 600		
	Addr	ess	
FORT LAUDERDALE, FL3	3301		
MALBRIGHT@PBYALAW.C	City/State an	d Zip Code	
		nnual report notificati	on)
For further information concerning this mat	ter, please call:		
Raymond McGann, Esq.	954 at (566-7117	
Name of Person	Area Code	Daytime Telephone	Number
Enclosed is a check for the following amo	unt:		
■\$125.00 Filing Fee □\$130.00 Filing Certificate of S	ng Fee & □\$15 Status Certifi	5.00 Filing Fee & fed Copy al copy is enclosed)	□\$160.00 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 Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303	

ARTICLES OF ORGANIZATION OF

2380 CRESTON AVE. ASSOCIATES SE LLC A FLORIDA LIMITED LIABILITY COMPANY

In forming a Florida Limited Liability Company (the "Company") under the Florida Revised Limited Liability Company Act, Chapter 605 of the Florida Statutes, the undersigned adopts the following Articles of Organization:

ARTICLE I NAME

The name of the Company is 2380 Creston Ave. Associates SE LLC.

ARTICLE II ADDRESS

The principal address of the Company is 365 S. Main Street, New City, NY 10956.

The mailing address of the Company is P.O. Box 706, New City, NY 10956.

ARTICLE III REGISTERED AGENT AND REGISTERED ADDRESS

The Registered Agent of the Company is PBYA Corporate Services, LLC, the address of which is: 200 South Andrews Avenue, Suite 600, Fort Lauderdale, FL 33301.

ARTICLE IV MANAGEMENT

The Company shall be MANAGER-MANAGED. The initial manager who shall serve until the first annual meeting of the member(s) or until a successor(s) is elected and qualified is as follows:

Manager(s): SAMAROO MANAGEMENT LLC P.O. Box 706 New City, NY 10956

ARTICLE V PURPOSE

The purpose for which this Company is organized is any and all lawful business.

IN WITNESS WHEREOF, the undersigned authorized representative has hereunto set his hand and seal on this 27th day of December, 2023.

Mark Albright, Esq.
Authorized Representative

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 605.0113, Florida Statutes, the undersigned limited liability company submits the following statement in designating the registered office/registered agent, in the State of Florida.

The name of the Company is 2380 CRESTON AVE. ASSOCIATES SE LLC.

The Registered Agent of the Company is PBYA Corporate Services, LLC, the address of which is: 200 South Andrews Avenue, Suite 600, Fort Lauderdale, FL 33301.

Having been named as registered agent and to accept service of process for the foregoing 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.

Dated as of the 27th day of December, 2023.

SIGNED:

PBYA Corporate Services, LLC

By: Perlman, Bajandas, Yevoli & Albright, P.L., MGRM

By: Mark Albright, Esq., Manager

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