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Division of Corporations

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Florida Department of State
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From: Account Name : HOMSI LAW, P.A.
Account Number : I20190000004
Phone : (407)377-5507
Fax Number : (407)377-5967

11

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: WILLIAM@HOMSILAW.COM

**FLORIDA LIMITED LIABILITY CO.
KOCH LAW, PLLC**

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STATE OF FLORIDA
TALLAHASSEE, FL

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**ARTICLES OF ORGANIZATION
FOR
KOCH LAW, PLLC**

The undersigned, for the purpose of forming a Florida Professional Service Limited Liability Company under the Florida Professional Service Limited Liability Company Act, Florida Statutes Chapter 621, hereby makes, acknowledges, and files the following Articles of Organization.

ARTICLE I

The name of the Professional Service Limited Liability Company is:

KOCH LAW, PLLC

ARTICLE II

The street address of the principal office of the Professional Service Limited Liability Company is:

341 NE 49TH STREET
OAKLAND PARK, FLORIDA 33334

The mailing address of the Professional Service Limited Liability Company is:

341 NE 49TH STREET
OAKLAND PARK, FLORIDA 33334

ARTICLE III

The purpose for which this Professional Service Limited Liability Company is organized is to engage in the practice of law.

ARTICLE IV

The Articles of Organization shall be effective immediately when filed with the Secretary of State of Florida.

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SECRETARY
FILE

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Mailing Address
8815 Conroy-Windermere Road, #402
Orlando, Florida 32835
(407) 377-5507
www.Homsilaw.com

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ARTICLE V

The name and Florida street address of the registered agent is:

LEAR KENT KOCH
341 NE 49TH STREET
OAKLAND PARK, FLORIDA 33334

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.

Signature of Registered Agent:

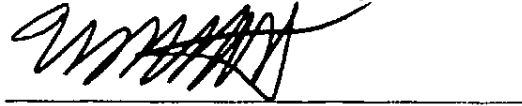

LEAR KENT KOCH

The Members hereby delegate the management of the PLLC to Manager(s).
The name and address of persons(s) authorized to manage the PLLC:

Operating Manager: LEAR KENT KOCH

Address of the Managers and Officers being the same as the Principal Address of the PLLC.

Signature of an Authorized Representative:


William M. Homsi, Esq.

I am an authorized representative of the members submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the PLLC and every year thereafter to maintain active status.

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FAX COVER SHEET

TO	
COMPANY	
FAX NUMBER	18506176381
FROM	Carol Panchana
DATE	2024/01/22 13:34:31 CST
RE	PEPPERWOOD COLLECTIVE, LLC

COVER MESSAGE

Good afternoon

Please see attached and kindly file. thank you.

Regards,

CTA Requirements: Effective 01/01/2024, entities may be required to file a Beneficial Ownership Information Report with FinCEN. If you determine that RASi is one of your Company Applicants, we have provided the applicable FinCEN ID number on your RASi service invoice. For more information on the CTA and how RASi can assist, click [here](#).



Carol Panchana
Corporate Specialist
corporateteam3@rasi.com

Registered Agent Solutions, Inc. A Lexitas Company
888-989-9589
917-243-5794 Fax
5301 Southwest Pkwy., Ste 400, Austin, TX 78735
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Sign up for CTA comply today!

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