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	11030)	
<u>-</u>		
(City	y/State/Zip/Phone #	⊭)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Name)
• •		
(Do	cument Number)	
Certified Copies	Certificates of	of Status
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Special Instructions to	Filing Officer	
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Office Use Only



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2024 MAR 15 AM 7:43 SECRETARY OF STATE TALLAHASSEE, FL

RECEIVED 24 MAR 15 PM 3: 1

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 · Tallahassee, Florida 32301 (850) 224-8870 · 1-800-342-8062 · Fax (850) 222-1222

Rush Smoke Shop 2 LLC		
DI 12 12 12 10000000000000000000000000000	125	
Please Debit FCA000000003 For:		
Thank you Seth Neeley		
Stall 1	ì	Art of Inc. File
		LTD Parmership File
		Foreign Corp. File
		L.C. File
	I	Fictitious Name File
		Trade/Service Mark
		Merger File
		Att, of Amend, File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Photo Copy 7777 2
		Photo Copy Certificate of Good Standing Certificate of Status
		Certificate of Fictitious Name S
		Corp Record Search
1		Officer Search
		Fictitious Search PT S
Signature		Fictitious Owner Search
		Vehicle Search
		Driving Record
Requested by:		UCC 1 or 3 File
Name Date	Time	UCC 11 Search
	T 1 -	UCC 11 Retrieval
Walk-In Will Pick	Up	Courier

COVER LETTER

	v Filing Sec ision of Cor					
etth reev		ke Shop 2 LLC				
SUBJECT:			Limited Liabi	lity Company		
The enclosed	d Articles of	Organization and fee(s) are submitte	d for filing.		
Please return	all correspo	ndence concerning this	matter to the	following:		
(Grant Kaplai	n, Esq.				
_			Name o	f Person		
1	EPGD Attorn	neys at Law, P.A.				
_			Firm/C	ompany		
	777 SW 37th	Ave., Suite 510				
-			Add	ress		
:	Miami, FL 3	3135				
_			City/State a	nd Zip Code		
er —	ric@epgdlaw				. •	
	ŀ	E-mail address: (to be u	sed for future	annual report notificat	ion)	
For further inf	ormation co	ncerning this matter, pl	ease call:			
(3rant Kaplan		786 (837-6787 	35 20 75 20	!
	Nam	e of Person		Daytime Telephon	e Number 24 H	لعشديي
Enclosed is a	check for th	ne following amount:			SECRETARY TALLAHAS	
■\$125.00 F	Filing Fee	□\$130.00 Filing Fee Certificate of Status	Certi	55.00 Filing Fee & fied Copy nal copy is enclosed)	Certificate of Status & Certificate of Status & Certificate of Status & Certified Copyris enclosed)	
		g Address ling Section		Street Address New Filing Section D	ivision	

New Filing Section
Division of Corporations
P.O. Box 6327

Tallahassee, FL 32314

The Centre of Tallahassee
2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Rus	1 Smoke Shop 2 LLC	P. C. M. I.C. " MILC	",
	(Must contain the words "Limited Liab	Inty Company, "L.L.C.," or "LLC.)
ARTICLE II - A	Address: ress and street address of the principal office	of the Limited Liability Company	· is:
	Principal Office Address:	Mailing	Address:
	2 NE 6th Ave #2	12322 NE 6th Ave #2	
Nort	h Miami, FL 33161	North Miami, FL 3316	1
(The Limited Lia another busines	Registered Agent, Registered Office, & Rability Company cannot serve as its own Registerity with an active Florida registration.) e Florida street address of the registered age	istered Agent. You must designate	an individual or
(The Limited Lisanother busines	ability Company cannot serve as its own Reg s entity with an active Florida registration.)	istered Agent. You must designate nt are: P.A. me	an individual or
(The Limited Lisanother busines	ability Company cannot serve as its own Reg is entity with an active Florida registration.) e Florida street address of the registered age EPGD Attorneys at Law, Na	istered Agent. You must designate in are: P.A. me	an individual or
(The Limited Lisanother busines	ability Company cannot serve as its own Reg sentity with an active Florida registration.) e Florida street address of the registered age EPGD Attorneys at Law, Na 777 SW 37th Ave., Suite Florida street address (P.) Miami	istered Agent. You must designate on are: P.A. me 510 D. Box NOT acceptable) F1. 33135	an individual or
(The Limited Lisanother busines	ability Company cannot serve as its own Reg sentity with an active Florida registration.) e Florida street address of the registered age EPGD Autorneys at Law, Na 777 SW 37th Ave., Suite Florida street address (P.)	istered Agent. You must designate on are: P.A. me 510 D. Box <u>NOT</u> acceptable)	an individual or

(CONTINUED)

SECRETARY OF STATE

ARTICLE IV-

The name and address of each person authorized to manage and control the Limited Liability Company:

<u>Title:</u>		Name and Address:		
	thorized Member			
"MGR" = Man	ager			
<u>MGR</u>		Tigran Ananyan		
		12322 NE 6th Ave #2 North Miami, FL 33161		
		North Mami, PL 55101		
				
f an effective date is lis ne date of filing.) <mark>Sote:</mark> If the date inserte	date, if other than the date ted, the date must be s	pecific and cannot be more than five be more the applicable statutory filing reconstructions.	business days prior to or 90 days at	
ne document's effective	date on the Departmen	it of State's records.		
RTICLE VI: Other pro	vicione if any			
KTICLE VE Onici pio	visions, ir any,			
		-		
REOUIRED S	IGNATURE:	9 <u>/</u>	BEUNE DA	
-	This document is exec I am aware that any fal constitutes a third degr	nember or an authorized representate uted in accordance with section 605.02 se information submitted in a document ee felony as provided for in s.817.155.	203 (1) (b), Florida/Statutes. It to the Departmentiof-State=	
	<u>Grant Kaplan, I</u>	isq. Typed or printed name of signee		
		Typed or printed name of signee	111	

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)