

224000123747

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

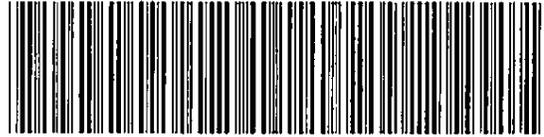
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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RECEIVED
2024 MAR 12 PM 4: 12
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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2024 MAR 12 AM 8: 00
SECRETARY OF STATE
TALLAHASSEE, FL

224000123747

Phase RUSH!

Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE 3/12/2024

WALK IN

ENTITY NAME SINATRA DEVELOPMENT COMPANY, LLC

DOCUMENT NUMBER

PLEASE FILE THE ATTACHED AND RETURN

XXXXXXX

- Plain Copy
Certified Copy
Certificate of Status

PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY

- Certified Copy of Arts & Amendments
Certified Copy of Arts & Amendments Complete File (Including Annual Reports)
Certificate of Status
Certificate of Status Reflecting:

APOSTILLE / NOTARIAL CERTIFICATION

COUNTRY OF DESTINATION
NUMBER OF CERTIFICATES REQUESTED

FILED
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OFFICE OF STATE
TALLAHASSEE, FL

TOTAL OWED \$155.00
ACCOUNT # I20140000108
United Corporate Services, Inc.
Keith Hoggard
Please call Tina at the above number for any issues or concerns. Thank you so much!

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: SINATRA DEVELOPMENT, LLC
Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DOLORES BURTON
Name of Person

UNITED CORPORATE SERVICES, INC.
Firm/Company

80 State Street, Suite 1101
Address

Albany, NY 12207
City/State and Zip Code

rcarbone@sinatraandcompany.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

_____ at (_____) _____
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$125.00 Filing Fee
- \$130.00 Filing Fee & Certificate of Status
- \$155.00 Filing Fee & Certified Copy (additional 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

2024 MAR 12 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SINATRA DEVELOPMENT, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

617 Main St, Suite 200, Buffalo, NY 14203

617 Main St, Suite 200, Buffalo, NY 14203

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

United Corporate Services, Inc.
Name

3458 Lakeshore Drive
Florida street address (P.O. Box **NOT** acceptable)

Tallahassee FL 32312
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..

Michael A. Barr

Registered Agent's Signature (REQUIRED)

(CONTINUED)

2024 MAR 12 AM 8:00
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TALLAHASSEE, FL
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ARTICLE IV-

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

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

MGR

Nicholas A. Sinatra

617 Main St, Suite 200, Buffalo, NY 14203

(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 SIGNATURE:

/s/ Nicholas A. Sinatra

Signature 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.

Nicholas A. Sinatra

Typed or printed name of signee

2026 MAR 12 AM 8:00
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

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)