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Special Instructions to Filing Officer:	RECEIVED 2024 HAR 28 PH 1:51 FALLAHASSEE, FLORID,
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CAPITAL CONNECTION, INC. 417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222	
City Food Hall Orlando LLC	_] _,
Please Debit FCA00000003 For: 125	
Thank you Seth Neeley	
Signature	Art of Inc. File
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SUBJECT		DD HALL ORLANI	DO LL	С				
JUDJEC	·	Name	of Lin	nited Liabi	lity Company			
The enclo	sed Articles of	Organization and fe	c(s) are	e submitte	l for filing.			
Please retu	irn all corresp	ondence concerning	this ma	atter to the	following:			
	Monica Tirc	ido, Esq.						
				Name o	fPerson			
	Tirado-Luci	ano & Tirado, PA						
				Firm/Co	ompany		<u> </u>	
	2655 LeJeur	ne Rd., Suite 1109						
			<u></u>	Add	ress			
	Coral Gable	es, FL 33134						
	mt@tltirado.o	com	С	ity/State ai	nd Zip Code			
			e used	for future	annual report notificat	ion)		
^P or further i		ncerning this matter.			·		25041112	
	Monica Tira	do	3(_at ()5	390-2320		- 23	ылы 4 -4 -
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Enclosed i	s a check for t	he following amount	:				<u>ି</u> ମୁକ୍ଳ ଅନ୍ୟୁକ୍ଳ	
≣ \$125.00) Filing Fee	□\$130.00 Filing Certificate of Stat		Certif	i5.00 Filing Fee & ied Copy al copy is enclosed)	Certific: Certified	1., 21 00 Filing Fee, ate of Status & 1 Copy 1 copy is enclosed)	
		ag Address Tiling 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

ARTICLE I - Name:

The name of the Limited Liability Company is:

CITY FOOD HALL ORLANDO 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:	<u>Mailing Address</u> :
8350 NW 52nd Terrace Suite 304	8350 NW 52nd Terrace Suite 301
Doral, FL 33166	Doral, FL 33166

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:

Tirado-Luciano & 1	irado, PA	
	Name	
2655 LeJeune Rd., S	Suite 1109	
Florida street addre	ss (P.O. Box <u>NOT</u> ac	cceptable)
Coral Gables	FL	33134
City	State	Zin

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., , r. ,

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV-

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

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR	Peter Rounce 12148 Waterstone Circle Palm Beach Gardens, FL 33412
AMBR	Petran Capital LLC 12148 Waterstone Circle Palm Beach Gardens, FL 33412

(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,

E VI. Other provisions, it any,			
REQUIRED SIGNATURE:		•	
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	ther		P
	mber or an authorized representat ed in accordance with section 605.02		ů
I am aware that any false	information submitted in a documen felony as provided for in s.817.155,	it to the Department of State	

Peter Rounce

Typed or printed name of signee

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)

🗙 Dropbox Sign

Audit trail

Title	City Food Hall Orlando LLC / Articles of Organization
File name	Articles_of_Organization.pdf
Document ID	bc38aa5777c2ba9c180e03c4061a9032b56b58b5
Audit trail date format	MM / DD / YYYY
Status	• Signed

Document History

() SENT	03 / 26 / 2024 18:28:26 UTC	Sent for signature to Peter Rounce (peter@cityfoodhall.com) from mt@tltirado.com IP: 23.126.143.209
O	03 / 26 / 2024 18:57:07 UTC	Viewed by Peter Rounce (peter@cityfoodhall.com) IP: 12.74.44.26
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