Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000119986 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : FL PATEL LAW PLLC

Account Number : I20170000097

Phone : (727)279-5037

Fax Number

: (727)888-1294

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

Email Address: Support@flpatellaw.com

FLORIDA LIMITED LIABILITY CO.

Gulf Citrus South LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

ARTICLES OF ORGANIZATION

2024 APR -2 AM 9: 30

FILED

FOR

TĂĔĽÁHÁŠSĖE, FĽÖRÍĎA

GULF CITRUS SOUTH LLC A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I. Name

The name of the Limited Liability Company is: Gulf Citrus South LLC (the "Company").

ARTICLE II. Address

The principal office of the Company is:

7402 North 56th Street Suite 355 #1144 Tampa, FL 33617

The mailing address of the Company is:

9701 Weshire Dr Upper Marlboro, MD 20774

ARTICLE III.

Registered Agent, Registered Office, & Registered Agent's Signature

The name and the Florida Street Address of the Registered Agent are:

FLP RA Services LLC 360 Central Avenue Suite 800 St. Petersburg, FL 33701

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.

Vishva S Nandu (sign)
FLP RA Services LLC

ARTICLE IV. Authorized Members and Managers

The Name and Address of each person authorized to manage and control the Limited Liability Company:

<u>Title</u>	Name and Address		
AMBR = Authorized Member MGR = Manager			
MGR	Janelle L. Johnson 7402 North 56th Street Suite 355 #1144 Tampa, FL 33617		

ARTICLE V.

The Effective date shall be the date of filing.

10	Elleville date shall be the d	ate of filling.			
	TIN	(sign)			
This document is executed am aware that any false	member or an authorized repre- ated in accordance with section 60 se information submitted in a doc- a third degree felony as provided	05.0203 (1) (b), Florida ument to the Departme	Statutes.		
	Janelle L. Johnso	n	·•	21	
	Authorized Representative/	Member	ALLAHASSEE, FLORIOF	2024 APR -2 AM 9: 30	士にじ