L74000156553

(Re	questor's Name)	
(Ad	dress)	
- (Ad	dress)	
(Cil	ty/State/Zip/Phone	e #)
PICK-UP	MAIT	MAIL
(Bu	isiness Entity Nar	ne)
. (Dc	ocument Number)	<u>.</u>
 Certified Copies	_ Certificates	s of Status
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Special Instructions to	Filing Officer	
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-	Office Use On	lv



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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088 If there are any issues please contact Patrice at 850-202-9071

Date:	04/05/2024	
	Patrice Rush	
	2325396	
	PALM B	EACH SUNSET, LLC
	es of Incorporation/Authoriz	
Ame	ndment	
☐ Char	nge of Agent	
Rein:	statement	
☐ Conv	version	
☐ Merg	er	
Disso	olution/Withdrawal	
☐ Fictit	ious Name	
Othe	rPLEASE PRO	VIDE CERTIFIED COPY UPON FILING
Authorized /	Amount: \$155.00	
Signature:	(Pall	

F: 800.944.6607

F: +852.2682.9790

COVER LETTER

	lew Filing Section livision of Corporations
SUBJECT	Palm Beach Sunset, LLC
SUBJEC	Name of Limited Liability Company
The enclos	sed Articles of Organization and fee(s) are submitted for filing.
Please retu	ım all correspondence concerning this matter to the following:
	Teresa Nicholl
	Name of Person
	Boulevard Management
	Firm/Company
	21731 Ventura Blvd., Suite 300
	Address
	Woodland Hills, CA 91364
	City/State and Zip Code
	Teresa@blvdmgmt.com
	E-mail address: (to be used for future annual report notification)
or further	information concerning this matter, please call:
	Teresa Nicholl at (818) 592-2000 extension 286
	Name of Person Area Code Daytime Telephone Number
Enclosed i	is a check for the following amount:
\$125.00 F	Filing Fee \$130.00 Filing Fee & \$155.00 Filing Fee & \$160.00 Filing Fee, Certificate of Status Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Street Address New Filing Section
	Division of Corporations Division of Corporations
	P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

		n Beach Sunset, LLC		
	(Must contain the words "Limite	d Liability Company, "	L.L.C.," or "LLC.")	
	E II - Address: ng address and street address of the principa	l office of the Limited I	Liability Company is:	
	Principal Office Address:		Mailing Address:	
	c/o Boulevard Management,		c/o Boulevard Management,	
	21731 Ventura Blvd, Suite 300		21731 Ventura Blvd, Suite 300	2024 APR – TERTE (A.F.
	Woodland Hills, CA 91364		Woodland Hills, CA 91364	APR
another b	ted Liability Company cannot serve as its ov usiness entity with an active Florida registra- and the Florida street address of the register	ed agent are:	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	S AMII: 2
		Cogency Global Inc	•	레 <u>12</u>
	115 N	Name		
	· 		Suite 4	
	· 	Name orth Calhoun Street, ess (P.O. Box <u>NOT</u> acc	Suite 4	
	Florida street addr	Name orth Calhoun Street, ess (P.O. Box <u>NOT</u> acc	Suite 4 ceptable)	TE 2
olace design further agre	Florida street addr Tallahassee	Name orth Calhoun Street, ess (P.O. Box NOT acc Florida State vice of process for the a pointment as registered relating to the proper a n as registered agent as	Suite 4 ceptable) 32301 Zip above stated limited liability companies agent and agree to act in this capatend complete performance of my duty	ny at the city. I
olace design further agre	Florida street addr Tallahassee City n named as registered agent and to accept servated in this certificate, I hereby accept the apet to comply with the provisions of all statutes	Name orth Calhoun Street, ess (P.O. Box NOT acc Florida State vice of process for the appointment as registered relating to the proper a	Suite 4 ceptable) 32301 Zip above stated limited liability companies agent and agree to act in this capatend complete performance of my duty	ny at the city. I

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
AMBR and MGR	Sylvester Stallone c/o Boulevard Management Attn: Teresa Nicholl 21731 Ventura Blvd., Suite 300, Woodland Hills, CA 913
AMBR and MGR	Jennifer Stallone
fective date is listed, the date must be sp	of filing: (OPTIONAL) ecific and cannot be more than five business days prior to or 90 day neet the applicable statutory filing requirements, this date will not be of State's records.
LE VI: Other provisions, if any.	or state 3 records.

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.

Teresa A. Nichall
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 (Only)

\$ 5.00 Certificate of Status (Optional)