

LL4000181259

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

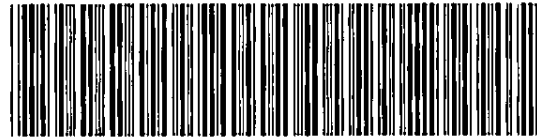
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CAPITAL CONNECTION, INC.

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

SF WYNWOOD LLC

Please Debit FCA000000003 For: 160

Thank you Seth Neeley



Signature

Requested by:

Name

Date

Time

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Will Pick Up

114 - Powers Printing - Tallahassee, FL 32301

Art of Inc. File _____
LTD Partnership File _____
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RA Resignation _____
Dissolution / Withdrawal _____
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Certificate of Good Standing _____
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Certificate of Fictitious Name _____
Corp Record Search _____
Officer Search _____
Fictitious Search _____
Fictitious Owner Search _____
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2024 JUN 28 PM 5:27

COVER LETTER

**TO: New Filing Section
Division of Corporations**

SUBJECT: SF Wynwood 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:

Charles H. Ratner

Name of Person

Charles Ratner, P.A.

Firm/Company

605 Lincoln Road, Suite #210

Address

Miami Beach, FL 33139

City/State and Zip Code

corporations@cratnerlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Charles H. Ratner 305 520-9120
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 JUN 27 2:27 PM
FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SF Wynwood 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:

5080 Biscayne Blvd.

Suite A

Miami, FL 33137

Mailing Address:

5080 Biscayne Blvd.

Suite A

Miami, FL 33137

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:

Charles Ratner, P.A.

Name

605 Lincoln Rd, Suite #210

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

Miami Beach

FL

33139

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..


Registered Agent's Signature (REQUIRED)

(CONTINUED)

NOTARIAL SEAL
NOTARY PUBLIC
STATE OF FLORIDA
COMMISSION EXPIRES 12/31/2022
GARY D. [illegible]

ARTICLE IV-

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:

MGR

Jason Shein
5080 Biscayne Blvd., Suite A
Miami, FL 33137

(Use attachment if necessary)

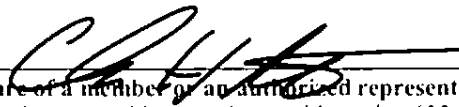
ARTICLE V: Effective date, if other than the date of filing: 04-22-2024 (OPTIONAL)

(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:



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.

Charles H. Ratner, Esq., Attorney, Authorized Signatory
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)

FILED
2024 APR 22 PM 3:10
CLERK OF THE COURT
JUDICIAL CIRCUIT IN AND FOR
DADE COUNTY, FLORIDA