

LL4000189698

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

(Business Entity Name)

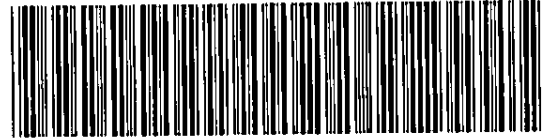
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Certificates of Status \_\_\_\_\_

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2024 APR 23 PM 2:52

TALLAHASSEE, FLORIDA

**Incorporating Services, Ltd.**

1540 Glenway Drive  
Tallahassee, FL 32301  
850.656.7956  
Fax: 850.656.7953  
www.incserv.com

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**ORDER FORM**

**TO** Florida Department of State  
The Centre of Tallahassee  
2415 North Monroe Street, Suite 810  
Tallahassee, FL 32303  
corphelp@dos.myflorida.com  
850-245-6051

**FROM** Melissa Moreau  
850.656.7953

**REQUEST DATE** 4/23/2024

**PRIORITY** Regular Approval

**OUR REF # (Order ID#)** 1250287

**ORDER ENTITY**

FAULKNER PARTNERS NPDC, LLC

**PLEASE PERFORM THE FOLLOWING SERVICES:**

FAULKNER PARTNERS NPDC, LLC ( FL )

New LLC filing

**NOTES:**

\$125.00 Authorized

**RETURN/FORWARDING INSTRUCTIONS:**

ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,



FILED  
APR 23 2024  
TALLAHASSEE, FL  
CLERK OF DISTRICT COURT

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

**ARTICLES OF ORGANIZATION  
OF  
FAULKNER PARTNERS NPDC, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Florida Statutes Chapter 605.0112, as amended, hereby makes, acknowledges and files the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company is FAULKNER PARTNERS NPDC, LLC (the "Company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Company is 1120 Bel Aire Drive East, Pembroke Pines, Florida 33027

ARTICLE III - REGISTERED OFFICE AND AGENT AND ADDRESS

The name and street address of the registered agent and the registered office of the Company in the State of Florida are:

Name:

Address:

Desiree Faulkner

1120 Bel Aire Drive East  
Pembroke Pines, Florida 33027

ARTICLE IV - OFFICERS

The name, title and address of the person authorized to manage and control the limited liability company is:


Name:

Address:

Desiree Faulkner  
Manager

1120 Bel Aire Drive East  
Pembroke Pines, Florida 33027

IN WITNESS WHEREOF, the undersigned has made and subscribed these Articles of Organization for the foregoing uses and purposes this 22<sup>nd</sup> day of April, 2024.

By:   
Name: Desiree Faulkner  
Title: Manager

REGISTERED AGENTS ACCEPTANCE

Having been named as registered agent and to accept service of process for FAULKNER PARTNERS NPDC, LLC at the place designated in this certificate, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and is familiar with and accepts the obligations of its position as registered agent as provided for in Chapter 605, Florida Statutes.

Dated: April 22, 2024

By: *D. Desiree Faulkner*  
Print Name: Desiree Faulkner

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CLERK