

L24000207628

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP

WAIT

MAIL

(Business Entity Name)

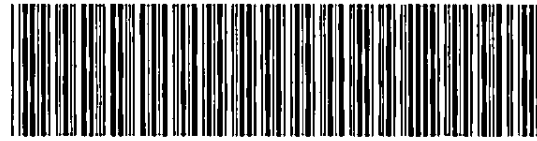
(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



10042918812

2024 MAY -8 AM 9:47
DEPARTMENT OF STATE
TALLAHASSEE, FL

FILED

DIRECTOR'S OFFICE
STATE OF FLORIDA DEPARTMENT OF
TALLAHASSEE, FLORIDA

2024 MAY -8 PM 1:53

RECEIVED

FLORIDA FILING & SEARCH SERVICES, INC.
P.O. BOX 10662 TALLAHASSEE, FL 32302
155 Office Plaza Dr Ste A Tallahassee FL 32301
PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE: 05/08/2024

NAME: E 23RD PROPERTY LLC

TYPE OF FILING: ARTICLES

COST: 155.00

RETURN: CERTIFIED COPY PLEASE

AUTHORIZATION: ABBIE/PAUL HODGE



2024 MAY -8 AM 9:47
TALLAHASSEE, FL

FILED

ACCOUNT: FCA000000015

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: E 23RD PROPERTY 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:

Mikael Cohen
Name of Person
Firm/Company
8701 Wilshire Blvd.
Address
Beverly Hills, CA 90211
City/State and Zip Code
mikaelc@ildicoinc.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Mikael Cohen at 310 205-5555
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 MAY - 8 AM 9:47
FILED
TALLAHASSEE, FL

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

E 23RD PROPERTY 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:

Mailing Address:

1901 Ponce De Leon Blvd.
Coral Gables, FL 33134

8701 Wilshire Blvd.
Beverly Hills, CA 90211

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:

PARACORP INCORPORATED
Name

155 Office Plaza Drive - 1st Floor
Florida street address (P.O. Box **NOT** acceptable)

Tallahassee FL 32301
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.

SEE ATTACHMENT PAGE

Registered Agent's Signature (REQUIRED)

(CONTINUED)

2024 MAY -8 AM 9:47
TALLAHASSEE, FL
FILED

ARTICLE IV-

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

Title:

Name and Address:

"AMBR" = Authorized Member

"MGR" = Manager

AMBR & MGR

Jean Simonian
1901 Ponce De Leon Blvd.
Coral Gables, FL 33134

MGR

Mikael Cohen
8701 Wilshire Blvd.
Beverly Hills, CA 90211

(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.

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.

Mikael Cohen

Typed or printed name of signer

2021 MAY -8 AM 9:47
DEPARTMENT OF STATE
TALLAHASSEE, FL

FILED

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)

STATE OF FLORIDA

REGISTERED AGENT CONSENT FORM

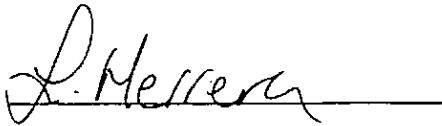
DATE: 5/7/2024

ENTITY NAME: E 23RD PROPERTY LLC

REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated
155 Office Plaza Drive, 1st Floor
Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.



Leticia Herrera, Assistant Secretary
Paracorp Incorporated

OFFICE OF STATE
TALLAHASSEE, FL

2024 MAY -8 AM 9:47

FILED