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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
: (Document Number)
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Special Instructions to Filing Officer
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236 Fast 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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SPECIAI	L INSTRUCTIONS:		

COVER LETTER

	iew Filing Sec Division of Co							
elib le <i>c</i> a		2nd Ave Realty I.	LC					
SUBJECT		Na	me of Lin	iited Liabili	ty Company			
The enclos	sed Articles of	Organization and	fee(s) are	submitted	for filing.			
Please retu	ırn all correspo	ondence concernii	ng this ma	tter to the f	ollowing:			
	Robyn Burro	ows						
				Name of	Person	<u> </u>		
	Nishad Khar	ı P.L.						
				Firm/Co	mpany			
	1303 N Orar	ige Ave						
				Addr	ess			
	Orlando, Flo	orida 32804						
				ity/State and	d Zip Code			
		shadkhanlaw.com						
		E-mail address: (t	o be used	for future a	nnual report notificati	on)	Α,	QD.
For further i	information co	ncerning this mat	ter, please	call:			120,	GA.
	Robyn Burro	ws	40 at (7	228-9711		2024 HAY 13	1
	Nam	ie of Person	Aı	ea Code	Daytime Telephon	e Number	3 AM SSEE	
Enclosed i	s a check for t	he following amo	unt:				E 8	0
■ \$125.00) Filing Fee	□\$130.00 Fili Certificate of \$		Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	Certific Certifie	.00 Filing Fee, cate of Status & d Copy al copy is enclose	d)
	<u>Mailir</u>	ng Address			Street Address	tutut		

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

name of the Limited Li	ability Company is:		
3299 NW 2nd A			
(Must	contain the words "Limited	Liability Company, "	L.L.C.," or "LLC.")
TCLE II - Address: mailing address and str	eet address of the principal o	ffice of the Limited I	Liability Company is:
	ncipal Office Address:		Mailing Address:
<u>Pri</u>			<u> </u>
<u>Pri</u> 3299 North Wes			itchess Dr
3299 North Wes Miami, Florida TCLE III - Registered Limited Liability Com	at 2nd Avenue 33127 1 Agent, Registered Office, pany cannot serve as its own	Orang & Registered Agent Registered Agent Y	zeburg, NY 10962
3299 North Wes Miami, Florida : TCLE III - Registered Limited Liability Comparer business entity with	at 2nd Avenue 33127 I Agent, Registered Office, pany cannot serve as its own n an active Florida registration are address of the registered	& Registered Agent Registered Agent. Y	eburg, NY 10962 's Signature:
3299 North Wes Miami, Florida : TCLE III - Registered Limited Liability Comparer business entity with	at 2nd Avenue 33127 1 Agent, Registered Office, pany cannot serve as its own n an active Florida registration	& Registered Agent Registered Agent. Yon.) Lagent are:	eburg, NY 10962 's Signature:
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Hfurther 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.St.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

"AMBR" = Authorized Mem	Name and Address:	
	Der	
"MGR" = Manager		
AMBR	Jesus Diaz	
	22 Dutchess Dr	
	Orangeburg, NY 10962	
<u> </u>		
		
		
effective date is listed, the date ite of filing.) If the date inserted in this block	an the date of filing:	-
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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)