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EXAMINER'S INITIALS:

FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243

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Sasquatch, LLC	
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	EXAMINER'S INITIALS:

## COVER LETTER

	New Filing Sec Division of Co							
SUBJEC		TCH, LLC						
SV DJEA	·	Name	of Lim	ited Liabil	ity Company			
The enck	osed Articles of	Organization and fe	e(s) are	submitted	for filing.			
Please re	turn all correspo	ondence concerning	this ma	tter to the	following:			
	Sandra Z. G	reen, Esq.						
				Name of	Person			*
	JONATHAI	N H. GREEN & ASS	SOCIA	TES, P.A.				
				Firm Ce	ompany			•
	901 Ponce d	te Leon Boulevard, S	Suite 60	)1			<u></u>	207
				Addr	ess		7.5.C.	- <u> </u>
	Coral Gable	s, Florida 33134					/H.V	至
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	Sandra Z. Gi	reen	30	5	372-5100 _)			
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		on of Corporations - Box 6327			The Centre of Tallaha 2415 N. Monroe Stre			
		assee, Ft. 32314			Tallahassee, FL 3230			

### ARTICLES OF ORGANIZATION FOR FLORIDALI VITED LIABILITY COMPANY

#### ARTICLE 1 - Name:

The name of the Limited Liability Company is:

### SASQUATCH, 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 Addre
------------------------

Mailing Address:

382 NE 191 Street	382 NE 191 Street
Suite 31904	Suite 31904
Miami, Florida 33179	Miami, Florida 33179

## 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:

#### JONATHAN H. GREEN & ASSOCIATES, P.A.

Name

901 Ponce de Leon Boulevard, Suite 601

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

Coral Gables	Florida	33134
City	State	Zip

Having been named as registered agont and to accept service of process for the above stated limited liability complete the place designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I = turther agree to comply with the provisions of all statutes relating to the proper and complete performance of my differs and ly am familiar with and accept the obligations of by position as pegistered agent as provided for in Chapter 605, FS = 5

Registered Agent's Signature (REQUIRED)

(CONTINUED)

## ARTICLE IV-

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

GR	RICH GLOBAL, LLC 382 NF 191 Street, Suite 31904 Miami, Florida 33179	
	·	2024
nttachment if necessary)		2024 JUN 17
date is listed, the date mus	it be specific and cannot be more than five business days prior toຈົເ 90 ຜິດລັ	days after 1
s effective date on the Depa Other provisions, if any	irtiment of State's records.	: 47
1	Effective date, if other than that is listed, the date must be a seried in this block do not feetive date on the Department.	Miami, Florida 33179  Intrachment if necessary)  Effective date, if other than the date of filing:  date is listed, the date must be specific and cannot be more than five business days prior to fire 90 (2)  g.)  g.)  te inserted in this block does not meet the applicable statutory fifing requirements, this date will got a effective date on the Department of State's records.

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 \$.817.155, F.S.

# SANDRA Z. GREEN, ESQ.

Typed or printed name of signce

# 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)