

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet**U240002132923**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H24000213292 3)))



H240002132923ABCZ

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.
Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : FL PATEL LAW PLLC
Account Number : I20170000097
Phone : (727)279-5037
Fax Number : (727)888-1294

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: Support@flpatellaw.com

FLORIDA LIMITED LIABILITY CO.

Forty-Four Risk PM, LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

RECEIVED
2024 JUN 19 PM 3:58
CORPORATIONS
COMMERCIAL
SERVICES

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

2024 JUN 19 PM 4:58

ARTICLES OF ORGANIZATION
FOR
FORTY-FOUR RISK PM, LLC
A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I.
Name

The name of the Limited Liability Company is: Forty-Four Risk PM, LLC (the “Company”).

ARTICLE II.
Address

The principal office and mailing address of the Company is:

715 Blind Oak Circle
St. Augustine, FL 32095

ARTICLE III.
Registered Agent, Registered Office, & Registered Agent’s Signature

The name and the Florida Street Address of the Registered Agent are:

FLP RA Services LLC
360 Central Avenue
Suite 800
St. Petersburg, FL 33701

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.

Vishva S Nandu (sign)
FLP RA Services LLC

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

2024 JUN 19 PM 4:58

ARTICLE IV.
Authorized Members and Managers

The Name and Address of each person authorized to manage and control the Limited Liability Company:

<u>Title</u>	<u>Name and Address</u>
AMBR = Authorized Member MGR = Manager	
<u>MGR</u>	Russell Parker 715 Blind Oak Circle St. Augustine, FL 32095

ARTICLE V.

The Effective date shall be the date of filing.



(sign)

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.

Russell Parker

Authorized Representative/Member