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<u>.</u>
Certified Copies Certificates of Status
Special Instructions to Filing Officer.
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Office Use Only



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MS



To: Department Of State, Division Of Corporations

From: Amanda Miller

Ext:

Date: 06/21/24 Order #: 1542395-1

Re: 645 Banyan Road, LLC Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Certificate of Formation/Incorporation

Amount to be deducted from our State Account: \$125.00 - FL State Account Number:

120000000195.

AUTH

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

AKTICLESOF ORGANIZATION FOR FLOR	KIDA LISHTED LIADILITY COMPANY
ARTICLE I - Name:	
The name of the Limited Liability Company is:	
645 Banyan Road, LLC	· · · · · · · · · · · · · · · · · · ·
(Must conatin the words "Limited Liabi	dity Company. "L.L.C.," or "L.LC.")
ARTICLE II - Address:	
The mailing address and street address of the principal office	of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1618 West Sandpointe Place	1618 West Sandpointe Place
Vero Beach, FL 32963	Vero Beach, FL 32963
ARTICLE III - Registered Agent, Registered Office, & Re The Limited Liability Company cannot serve as its own Reginother business entity with an active Florida registration.)	
The name and the Florida street address of the registered ager	nt are:
Rebecca F. Emmons	
Nai	me
210) Indian River Blyd	Suite 200

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. ?!? further agree to comply with the provisions of all statutes retating to the proper and complete proper and 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.

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

State

Vero Beach

City

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:	
AMBR	Next Level Development SE, LLC 1618 West Sandpointe Place Vero Beach, FL 32963	
MGR	Ethan Theune 1618 West Sandpointe Place Vero Beach, FL 32963	
(Use attachment if necessary)		
(If an effective date is listed, the date must be sp the date of filing.)	the of filing:	11
ARTICLE VI: Other provisions. if any.	NA STORY	
REQUIRED SIGNATURE:	DocuSigned by:	
This document is execu I am aware that any fals	nember or an authorized representative of a member. The second and the section 605.0203 (1) (b), Florida Statutes, see information submitted in a document to the Department of State ree felony as provided for in \$ 817.155. F.S.	

Filing Fees:

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Ethan Theune