## 1240UU283485

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Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE : FIN-55549 AUTHORIZATION .: COST LIMIT :(/ ORDER DATE : 06/24/2024 ORDER TIME : ORDER NO. : CUSTOMER NO: DOMESTIC FILING NAME: EW 5758 FHR LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION \_\_ CERTIFICATE OF LIMITED PARTNERSHIP \_ 🗸 \_ ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_ CERTIFIED COPY PLAIN STAMPED COPY \_\_\_\_ CERTIFICATE OF GOOD STANDING CONTACT PERSON: AMANDA MILLER

EXAMINER'S INITIALS:

CORPORATION SERVICE COMPANY

1201 Hays Street

## **COVER LETTER**

	New Filing Sec Division of Co						
\$11 <b>D</b> 1 <b>E</b> 7	EW 5758						
SUBJEC	SUBJECT: Name of Limited Liability Company						
The encl	osed Articles of	Organization and fee(s) a	re submitte	d for filing.			
Please re	turn all corresp	ondence concerning this m	atter to the	following:			
	Marc DeCe	cchis					
			Name o	f Person	<del></del>		
	Lawrence Z	irinsky Associates				: 3 ! - : i	71.5  √1 1/2 m  1.502
			Firm/C	ompany			N 2
	60 East 42n	d Street					
			Add	ress		ਜੈਨ 15.	9
	New York,	NY 10165			,	Fi.	47
			City/State a	nd Zip Code			
	MarcD@lzar	ealty.com E-mail address: (to be used	I for firme	annual ranger natificat	inn)		
		·		amuai report notineat	1011)		
For further	r information co	oncerning this matter, pleas	se call:				
	Marc DeCec	chis 2 at (	.12	499-0606 )			
	Nam		rea Code	Daytime Telephon	e Number	•	
Enclosed	l is a check for t	he following amount:					
□\$125.0	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certif	55.00 Filing Fee & Ted Copy nal copy is enclosed)	□\$160.00 Certificate Certified C (additional c	of Sta Copy	itus &
	New F	ng Address Filing Section		Street Address New Filing Section D			
	Division P.O. B	on of Corporations Box 6327 lassee, FL 32314		The Centre of Tallaha 2415 N. Monroe Stre Tallahassee, FL 3230	et, Suite 810		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of	- Name: the Limited Liability Compa	any is:			
<u>. F</u>	W 5758 FHR LLC				
	(Must conatin the w	vords "Limited	Liability Comp	any, "L.L.C.," or "LLC.")	
	l - Address: address and street address of	f the principal o	ffice of the Lit	nited Liability Company is:	
	Principal Office Address:			Mailing Address:	
_6	0 East 42nd Street, Suite 55	0, NY, NY 101	65	Same	
_					
<u></u>					
(The Limited another business	ness entity with an active Flod the Florida street address of	serve as its own orida registration of the registered	Registered Agon.) I agent are:	ent. You must designate an individual c i :	)24 JUN
	<u>Corpo</u>	oration Service	Company Name		24 AM S
			Name	ř.	10 DE
		Hays Street	- (D.O. D N/		- <del>-</del>
	rione	da street addres:	s (P.O. Box <u>M</u>	acceptable)	7
	<u>_Tallal</u>	nassee	FL	32301	
		City	State	Zip	
place designat urther agree t	ed in this certificate, I hereby o comply with the provisions th and accept the obligations	accept the appo of all statutes re	ointment as reg clating to the pi as registered a	or the above stated limited liability comp istered agent and agree to act in this cap roper and complete performance of my d gent as provided for in Chapter 605, F.S	pacity. I luties, and I

(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	Name and Address:
"MGR" = Manager	
MGR	FHR EDGE LLC, a Delaware limited liability company 60 East 42nd Street New York, NY 10165
AMBR	Jacob Zirinsky 60 East 42nd Street New York, NY 10165
·	
	20
(Use attachment if necessary)	1024 JUN 24, 1100 24, 1100 24, 1100 24, 1100 24, 1100 24, 1100 24, 1100 24, 1100 24, 1100 24, 1100 24, 1100 24
If an effective date is listed, the date must be s	pecific and cannot be more than five business days prior to or 90 days after meet the applicable statutory filing requirements, this date will not be listed as
RTICLE VI: Other provisions, if any.	
,	$ \Lambda_{\Lambda}$
REQUIRED SIGNATURE:	In I And
This document is exec I am aware that any fal-	nember or an authorized representative of a member.  uted in accordance with section 605.0203 (1) (b). Florida Statutes, see information submitted in a document to the Department of State eee felony as provided for in s.817.155, F.S.
Marc DeCecchi	Typed or printed name of signee

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)