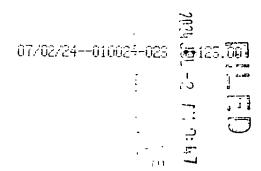
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## **Department of State Division of Corporations**

### **American Expediting (Stealth Courier)**

1531 Commonwealth Business Dr Suite 105 Tallahassee, FL. 32303 850-294-5632

**Stealth Courier Box** 

Requester: Azurede Ross

Company: Meridian Partners

Job#: 15380955

Date - 7/2/2024

## **Department of State Division of Corporations**

## **American Expediting (Stealth Courier)**

1531 Commonwealth Business Dr Suite 105 Tallahassee, FL. 32303 850-294-5632 Date-7/2/2024

## **Stealth Courier Box**

Requester: Azurede Ross

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Job#: 15380955

### **COVER LETTER**

	New Filing Sec Division of Co							
SUBJEC		Parktowne Ind 1 LLC						
NODJIJC	· · ·	Name of Limited Liability Company						
The encl	osed Articles of	Organization and fee(s) a	re submitte	d for filing.				
Please re	turn all correspo	ondence concerning this n	atter to the	following:				
	Azurede Ro	ss						
			Name c	of Person	-			
	Meridian Pa	rtners Law						
	· · · · · · · · · · · · · · · · · · ·		Firm/C	ompany	<u> </u>			
	4929 W. Cy	press St.					777.	
	•		Add	lress		•		
	Tampa, FL	33607				,	2	
	azurede@me	ridianpartnerslaw.com	City/State a	nd Zip Code		. 1. 3		
	<del></del>	E-mail address: (to be use	d for future	annual report notificat	ion)	7.4		
For further	r information co	ncerning this matter, plea	se call:					
	Azurede Ros		813	443-5260				
	Nam		Area Code	Daytime Telephon	e Number	-		
Enclosed	Lis a check for t	he following amount:						
	00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certi	55.00 Filing Fee & fied Copy nal copy is enclosed)	□\$160.00 Certificate Certified C (additional c	e of Status Copy	: &	
Mailing Address  New Filing Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314				Street Address New Filing Section D The Centre of Tallaha 2415 N. Monroe Stre Tallahassee, FL 3230	assee et, Suite 810			

#### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Edgewater Parktown	e Ind 1 LLC				
(Must conti	ain the words "Limited L	iability Company,	"L.L.C.," or "LLC.")		
RTICLE II - Address:					
he mailing address and street ac	ddress of the principal of	fice of the Limited	Liability Company is:		
<u>Princip</u> :	al Office Address:		Mailing Addre	ess:	
5600 MARINER ST	REET SUITE 140	560	) MARINER STREET, SU	UITE 140	
The Limited Liability Company	eannot serve as its own I	& Registered Agei Registered Agent.		ividual or	
RTICLE III - Registered Age The Limited Liability Company nother business entity with an a	cannot serve as its own I active Florida registration	& Registered Agei Registered Agent. 1.)	nt's Signature:	lividual or	2021: 33
RTICLE III - Registered Age The Limited Liability Company nother business entity with an a	cannot serve as its own I active Florida registration	Registered Agent. 1.) agent are:	nt's Signature:		2021, 3311, -
RTICLE III - Registered Age The Limited Liability Company nother business entity with an a	eannot serve as its own I active Florida registration address of the registered	Registered Agent. 1.) agent are:	nt's Signature:		1
RTICLE III - Registered Age The Limited Liability Company nother business entity with an a	eannot serve as its own I active Florida registration address of the registered	& Registered Agent. Registered Agent. 1.) agent are: ESQ. Name	nt's Signature:		7021 JUL - 2 F
RTICLE III - Registered Age The Limited Liability Company nother business entity with an a	eannot serve as its own I active Florida registration address of the registered SYKES, BRYAN W.	Registered Agent. 1.) agent are: ESQ. Name	nt's Signature: You must designate an ind		.∵
RTICLE III - Registered Age The Limited Liability Company nother business entity with an a	eannot serve as its own I active Florida registration address of the registered: SYKES, BRYAN W.	Registered Agent. 1.) agent are: ESQ. Name	nt's Signature: You must designate an ind		1

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

#### ARTICLE IV-

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

**MGR** = Manager  MGR**   PARKTOWNE INDUSTRIAL ME, LLC   S600 MARINER STREET, SUITE 140     TAMPA, FL 33609	Title: "AMBR" = Authorized Member	Name and Address:
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the date of filing:	<del>-</del>	PARKTOWNE INDUSTRIAL ME, LLC 5600 MARINER STREET, SUITE 140
(Use attachment if necessary)  ARTICLE V: Effective date, if other than the date of filing:		
ARTICLE V: Effective date, if other than the date of filing:		
RTICLE V: Effective date, if other than the date of filing:		
RTICLE V: Effective date, if other than the date of filing:		
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be list the document's effective date on the Department of State's records.  ARTICLE VI: Other provisions, if any.	· · · · · · · · · · · · · · · · · · ·	ر الولى
	he date of filing.)  Note: If the date inserted in this block doe.	s not meet the applicable statutory filing requirements, this date will not be listed a
REOUIRED SIGNATURE:	REOUIRED SIGNATURE:	Lyn

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.

BRYAN W. SYKES / AUTHORIZED REPRESENTATIVE

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)