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(Re	questor's Name)	
ĎA)	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	= #)
☐ ЫCK-NЬ	WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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400433197 AUG 23 MH 9: 47



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088 If there are any issues please contact Patrice at 850-202-9071

Date:	08/23/2024		
Name:_	Patrice Rush	_	
Referen	ce #: 2472294	— (<i>t</i> ¹)	21
	ame:VLH PRO		2024 AUG 23
√	Articles of Incorporation/Authorization	TAR AHA	G 23 AM 9: 47
	Change of Agent	n	~
F	Reinstatement		
	Conversion		
	Merger		
	Dissolution/Withdrawal		
F	rictitious Name		
	Other		
Authori: Signatu	zed Amount: \$125.00 re:		

F: 800.944.6607





115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088 If there are any issues please contact Patrice at 850-202-9071

Date:	08/23/2024		
	Patrice Rush	<u>1</u>	
Reference	#:2472294		2021 AHG
		/LH PROPERTY 2, LLC	AII C
✓ Artic		A수 · · · · · · · · · · · · · · · · · · ·	23 NH 9:1.7
Chai	nge of Agent		
☐ Rein	statement		
Con	version		
☐ Mer	ger		
☐ Diss	olution/Withdrawal		
☐ Fiction	tious Name		
☐ Othe	er		
Authorized	Amount: \$1	25.00	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

VLH PROPERTY 2,			
(Must cont	ain the words "Limited L	iability Company,	L.L.C.," or "LLC.")
CLE II - Address: ailing address and street a	ddress of the principal of	fice of the Limited	Liability Company is:
<u>Princip</u>	al Office Address:		Mailing Address:
2951 SE Dominica T	Гегтасе	2951	SE Dominica Terrace
		_	
Stuart, FL 34997 CLE III - Registered Againited Liability Companyr business entity with an a	y cannot serve as its own I	& Registered Ager	ou must designate an individual のづく
CLE III - Registered Ag	y cannot serve as its own lactive Florida registration address of the registered	& Registered Ager Registered Agent. \(\)	ot's Signature:
CLE III - Registered Aginited Liability Company	y cannot serve as its own I active Florida registration	& Registered Ager Registered Agent. \(\)	ou must designate an individual of
CLE III - Registered Aginited Liability Company	y cannot serve as its own lactive Florida registration address of the registered	& Registered Ager Registered Agent. V agent are:	ou must designate an individual of
CLE III - Registered Aginited Liability Company	y cannot serve as its own lactive Florida registration address of the registered DONNA BLOOM	& Registered Ager Registered Agent. Y agent are: Name	ot's Signature: You must designate an individual of SSE SSE SSE SSE SSE SSE SSE SSE SSE SS
CLE III - Registered Aginited Liability Company	cannot serve as its own lactive Florida registration address of the registered DONNA BLOOM 2951 SE Dominica Te	& Registered Ager Registered Agent. Y agent are: Name	ot's Signature: You must designate an individual of SSE SSE SSE SSE SSE SSE SSE SSE SSE SS

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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Title:	thorized Member	Name and Address:	
"MGR" = Mar			
<u>VP</u>		JUAN MARTINEZ 2951 SE Dominica Terrace Stuart, FL 34997	_
<u>s. T</u>		DONNA BLOOM 2951 SE Dominica Terrace Stuart, FL 34997	_ _ _
			-
		ALL	2024 AUG
		<u> </u>	- 62
		· · ·	<u> </u>
(Use attachme	nt if necessary)	SEE.	AH 9:
effective date is l te of filing)	isted, the date must be	specific and cannot be more than five business days prior to 6P9 of meet the applicable statutory filing requirements, this date will not	odaysa
cument's effective	e date on the Departme	ent of State's records.	
CLE VI: Other pr			
DEVINDED	SIGNATURE:		
REVUIRED	JESUS	Lane.	
		member or an authorized representative of a member.	-
	This document is exe	ecuted in accordance with section 605.0203 (1) (b), Florida Statutes also information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.	e
	This document is exe	Talse information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.	e e

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)