L2400779096

(Re	questor's Name)	
(Ad	dress)	
(Add	dress)	
•	•	
	y/Śtate/Zip/Phone	- #\
(Oil	y/State/Zip/F1lofit	5
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	ne)
(Do	cument Number)	
`	. ,	
Cartified Conice	Carificator	of Status
Certified Copies	_ Centinicates	5 01 518105
Special Instructions to I	Filing Officer:	
		ı





800435256278

08/27/24--01002--003 **125.00

2024 AUG 27 PH 5: O4

COVER LETTER

	New Filing Sec Division of Cor					
SUBJEC	Move in B	ond, LLC				
50000		Name o	f Limited L	iability	Company	
The encl	osed Articles of	Organization and fee(s) are subm	nitted fo	r filing.	
Please re	turn all correspo	ondence concerning th	is matter to	the foll	owing:	
	Joseph Mess	ser				
			Nar	ne of Pe	erson	
	Messer Stric	ckler Burnette Ltd.				
			Fire	m/Comp	pany	.
	142 W. Stati	ion Street				
				Address	<u> </u>	
	Barrington,	IL 60010				
			City/Sta	ate and 2	Zip Code	
		sserstrickler.com				
]	E-mail address: (to be	used for fu	ture ann	ual report notificati	ion)
For furthe	r information co	ncerning this matter, p	olease call:			
	Joseph Mess		312)	334-3440	
	Nam	ne of Person		ode	Daytime Telephon	e Number
Enclosed	lis a check for t	he following amount:				
		_		Teres	00 PM P 0	MALKA AA PINA PA
≡312 5.	00 Filing Fee	□\$130.00 Filing F Certificate of Statu	s C	Certified	00 Filing Fee & Copy copy is enclosed)	☐\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address

New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:				
The name of the Limited Liability	Company is:			
Move In Bond, LLC				
(Must conta	in the words "Limite	d Liability Comp	any, "L.L.C.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and street ad-	dress of the principal	office of the Lin	nited Liability Company is:	
n			5 7 W. A. 1	
Principa	l Office Address:		Mailing Address:	
2900 Monarch Lakes	Blvd.		2900 Monarch Lakes Blvd.	
Miramar, FL 33027			Miramar, FL 33027	
				
ARTICLE III - Registered Agei	nt. Registered Office	e. & Registered	Agent's Signature:	
(The Limited Liability Company	cannot serve as its ov	vn Regist <mark>e</mark> red Ag	ent. You must designate an individual or	
another business entity with an ac	ctive Florida registrat	tion.)		
The name and the Florida street address of the registered agent are:				
	_	J		
	Joseph Messer			
		Name		
	1805 Myrtle Aven	ue N. #1202		
	Florida street addr	ess (P.O. Box No	OT acceptable)	
	Jacksonville	FL	32209	

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..

State

City

Registered Agent's Signature (REQUIRED)

Zip

(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	Timothy Fortner 2900 Monarch Lakes Blvd. Miramar, FL 33027
(Use attachment if necessary)	
If an effective date is listed, the date must be the date of filing.)	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 days after
Note: If the date inserted in this block does no the document's effective date on the Departmen	it meet the applicable statutory filing requirements, this date will not be listed as nt of State's records.
ARTICLE VI: Other provisions, if any.	
REQUIRED SIGNATURE:	Man
This document is exec l am aware that any fa	member or an authorized representative of a member. cuted in accordance with section 605.0203 (1) (b). Florida Statutes. lse information submitted in a document to the Department of State tree felony as provided for in s.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)

Timothy Fortner