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COVER LETTER

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	ew Filing Secti ivision of Corp						
	SILVER 614 LLC						
SUBJECT	Name of Limited Liability Company						
The enclos	ed Articles of C	Organization and fee(s) are	submitted	d for filing.			
Please retu	rn all correspon	idence concerning this mat	ter to the	following:			
	STACY SMA	LL					
	Name of Person						
	SMITH THOMPSON SHAW						
	Firm/Company 3520 THOMASVILLE ROAD - 4TH FLOOR Address						
	\mathcal{G}						
City/State and Zip Code tammyleeproperty@gmail.com							
E-mail address: (to be used for future annual report notification)							
For further i	nformation con	cerning this matter, please	call:				
	STACY SMALL 850 893-4105						
	Name of Person Area Code Daytime Telephone Number						
Enclosed i	s a check for the	e following amount:					
■\$ 125.00) Filing Fee	☐\$130.00 Filing Fee & Certificate of Status	Certif	55.00 Filing Fee & fied Copy nal copy is enclosed)	□\$160.00 Fi Certificate of Certified Cop (additional cop	f Status & py	
	New Fil Division P.O. Bo	z Address ling Section n of Corporations ox 6327 ssee, FL 32314		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stre Tallahassee, FL 3230	issee et, Suite 810		

ARTICLES OF ORGANIZATION

OF

SILVER 614 LLC

The undersigned, pursuant to the provisions of Chapter 605 of the Florida Statutes (the "Florida Revised Limited Liability Company Act"), for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

1. NAME.

The name of the Limited Liability Company is SILVER 614 LLC (hereinafter referred to as the "Company").

2. **PERIOD OF DURATION**.

The period of duration of the Company shall be perpetual, unless it is dissolved as provided in the Florida Limited Liability Act or the written Operating Agreement to be executed by all of the Members of the Company.

3. PURPOSE.

To engage in any and all other businesses and activities permitted by the laws of the State of Florida. The Company shall have all of the powers vested in a limited liability company organized and existing by virtue of such laws.

4. MAILING ADDRESS OF BUSINESS.

The mailing address of the business is P.O. Box 12637, Tallahassee, FL 32317. Such address may be changed from time to time as provided in the Operating Agreement.

5. ADDRESS OF PLACE OF BUSINESS.

The street address of the place of business in Florida for the Company is 2050 Capital Circle, NE, Tallahassee, FL 32308. Such address may be changed from time to time as provided in the Operating Agreement.

6. REGISTERED AGENT AND OFFICE.

The initial registered agent in Florida for the Company is: **FRANK S. SHAW IV** located at 3520 Thomasville Road, 4th Floor, Tallahassee, Florida 32309.

7. MANAGEMENT.

The name and address of the person authorized to manage and control the Limited Liability Company are as follows:

Tammy Lee P.O. Box 12637 Tallahassee, Florida 32317

DATED this _____ day of September, 2024.

Taminy Lee

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT WITH WHOM PROCESS MAY BE SERVED.

Pursuant to the provisions of Chapter 605 Florida Statutes, the undersigned Limited Liability Company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

- 1. The name of the limited liability company is SILVER 614 LLC.
- 2. The name of the registered agent and office is: **FRANK S. SHAW IV** located at 3520 Thomasville Road, 4th Floor, Tallahassee; Florida 32309.

ACKNOWLEDGEMENT

Having been named to accept service of process for the above limited liability company, at the place designated in this certificate, I hereby accept to act in this capacity and agree to comply with the provision of said Act relative to being available at said location.

FRANK S. SHAW IV Registered Agent