LZ40004341156

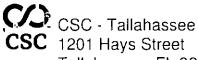
Office Use Only



600434160356

RECEIVED

. . .



Tallahassee, FL 32301-2607 850-558-1500, Ext: x61563

To: Department Of State, Division Of Corporations

From: Shauna Godbolt

Ext: x61563 Date: 10/14/24 Order #: 1644767-1

Re: SLG 10301 Fisher Avenue LLC

Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Certificate of Formation/Incorporation

Amount to be deducted from our State Account: \$125.0- FL State Account Number:

12000000195

Please take the following action:

File in your office on basis

Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

ARTICLE I - Name:

The name of the Limited Liability Company is:

SLG 10301 Fisher Avenue LLC

(Must conatin the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address: Mailing Address: c/o Jupiter Business Center c/o Jupiter Business Center 601 Heritage Drive, Suite 217 601 Heritage Drive, Suite 217 Jupiter, FL 33458 Jupiter, FL 33458 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Corporation Service Company Name 1201 Hays Street Florida street address (P.O. Box NOT acceptable) Tallahassee 32301

State

Zip

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..

Corporation Service Company

City

(CONTINUED)

-Shauna Godbolt –

ARTICLE IV-

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

Title:	Name and Address:
"AMBR" = Authorized Memb- "MGR" = Manager	er
MGR	Stephen I., Green
	180 Bears Club Jupiter, Fl. 33477
	Jupiter, Pt. 33477
.	
	10-101-10
	
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(Use attachment if necessary)	
ARTICLE V: Effective date, if other that	in the date of filing: (OPTIONAL)
(If an effective date is listed, the date n	oust be specific and cannot be more than five business days prior to or 90 days aft
the date of filing.) Note: If the date incorrect in this blook	does not meet the applicable statutory filing requirements, this date will not be listed
the document's effective date on the De	
	partition of Game Cross and
ARTICLE VI: Other provisions, if any.	
	-
REQUIRED SIGNATURE:	CocuSigned by:
RECORD SIGNATORE.	May Shim
	A430222FD5DD468
Signatu This documen	re of a member or an authorized representative of a member. t is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
	at any false information submitted in a document to the Department of State
constitutes a th	aird degree felony as provided for in s.817.155, F.S.
	May Shim
	Typed or printed name of signee
	Filing Fees:
\$125.00 Filing Fee for Artic	cles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Or	

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

FIN-69767