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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
<u>.</u>
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer
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CAPITAL CONNECTION, INC.417 E. Virginia Street, Suite 1 • Tullahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

530 Grant LLC		- -				
Please Debit FCA0000	000003 For: 125					
Thank you Seth Neels	-V					
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			Art of Inc. File LTD Partnership File		2024 NOV -4	
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			Certificate of Status			
			Certificate of Fictitious Name			
			Corp Record Search			
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Name	Date Time		UCC 11 Search	-		
			UCC 11 Retrieval			
Walk-In thomselve SA 800	Will Pick Up		Courier			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

The name of the Limited Liability Company is:

530 Grant LLC

(Must contain 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:

1803 W 9th Street

Lehigh Acres, FL 33972

1803 W 9th Street Lehigh Acres, FL 33972

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:

Lanyard Investments LLC

Name

1803 W 9th Street

Florida street address (P.O. Box NOT acceptable)

Lehigh Acres

<u>es</u> r

33972

City

State

Ζιp

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)

Title: "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager			
AMBR	Lanyard Investments L	LC	
	1803 W 9th Street Lehigh Acres, FL 33972		
			
		ZOZ4 NOV	
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			5
(Use attachment if necessary)		3 00 € 1	9
	10/21/2024		Q
TICLE V: Effective date, if other than the da an effective date is listed, the date must be s	ate of filing: 10/31/2024	. 1 () 1 () 1 () 1 () 1 ()	66
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RTICLE VI: Other provisions, if any.			
trioning the same provident and			

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.

Michel Padron

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

S 30.00 Certified Copy (Optional)

S 5.00 Certificate of Status (Optional)