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(Requestor's Name)
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PICK-UP WAIT MAIL
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(Document Number)
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Special Instructions to Filing Officer:





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2025 JAN 29 PH 3: 2

FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-54372 (850) 524-6243

Please use funds from the account Authorization Signature 210 Pelicans, LLC Business	#Document
Walk in	Will wait
Certified Copies of articles Certificate of Status	725 JAN 29
NEW FILINGS	AMENDMENTS STEEL
Profit Not for Profit X_LLC Domestication INC CORP OTHER	Amendment Resignation of R.A. Change of Registered Agent Revocation of Dissolution Conversion Statement of Authority Merger Restated Articles
OTHER FILINGS	REGISTRATION/QUALIFICATIONS
TRANSMITTAL LETTER	Foreign Filing Partnership
Fictitious Name	Reinstatement
Statement of Authority	Statement of CORRECTION Domestication of a Foreign Corp.
APOSTIL	Domestication of a foreign corp.
COUNTRY	Other
EXAMINER'S INITIALS:	

TALLAHASSEE, FL 32309 (850) 524-54372 (850) 524-6243 Please use funds from the account | I20210000160: \$125.00 Authorization Signature 210 Pelicans, LLC Business #Document Walk in Will wait Certified Copies of articles Certificate of Status **AMENDMENTS NEW FILINGS** ____ Amendment Profit Not for Profit Resignation of R.A. _X__LLC Change of Registered Agent Revocation of Dissolution Domestication ____ Conversion INC ___Statement of Authority CORP **OTHER** ____ Merger Restated Articles OTHER FILINGS REGISTRATION/QUALIFICATIONS TRANSMITTAL LETTER Foreign Filing Partnership Fictitious Name Reinstatement Statement of CORRECTION _ Statement of Authority Domestication of a Foreign Corp. APOSTIL _ COUNTRY Other

FLORIDA CAPITAL COURIER SERVICES, INC

EXAMINER'S INITIALS:

2330 CLARE DRIVE

COVER LETTER

TO:	New Filing Section Division of Corp.								
CUB IE	210 Pelicans								
SUBJE	CT:	Nan	e of Lir	nited Liabilit	y Company				
The enc	losed Articles of C	Organization and	fee(s) at	e submitted t	for filing.			702	
Please r	eturn all correspor	ndence concernin	g this m	atter to the fo	bllowing:		· : .	2025 J.T.Y. 29	. *
	Kevin Plotkir	ı, Esq.							1
				Name of l	Person		(n	 	•
	Plotkin Law	Firm, PA					•	। उ	
	,			Firm/Con	mpany				
	2500 Hollyw	ood Blvd., Suite	202				<u></u>		
				Addre	ess				
	Hollywood, l	FL 33020							•
	kevin@nlotkii	niawfirmpa.com	(City/State and	d Zip Code				
			be use	d for future a	nnual report notificati	on)			
For furth	er information co	ncerning this matt	er, plea	se call:					
	Kevin Plotkii	ı, Esq.	at (954	541-9888				
	Nam	e of Person		Area Code	Daytime Telephone	e Number	_		
Enclos	ed is a check for th	ne following amo	ent:						
	5.00 Filing Fee	□\$130.00 Filin Certificate of S	ng Fee &	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	□\$160.0 Certifica Certified (additional	te of Sta Copy	tus &	
	New F Division	ng Address iling Section on of Corporation lox 6327	s		Street Address New Filing Section D The Centre of Tallaha 2415 N. Monroe Stre	assee	٠		

Tallahassee, FL 32314

Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Co	ompany is:	•		
210 Pelicans, LLC			AV A C " - " WI I C "	
(Must contain t	he words "Limited L	iability Com	pany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street addre	ss of the principal of	fice of the Li	mited Liability Company is:	
Principal O	ffice Address:		Mailing Add	ress:
2500 Hollywood Bivd., S	Suite 202		2500 Hollywood Blvd., Suit Hollywood, FL 33020	e 202
Hollywood, FL 33020			Honywood, T.E. 3,7020	
ARTICLE III - Registered Agent, (The Limited Liability Company can another business entity with an active The name and the Florida street adds	not serve as its own lee Florida registration	Registered A n.) agent are:	gent. You must designate an in	ndividual or
<u></u>		Name		
2	500 Hollywood Blvo	d., Suite 202		
	Florida street address		OT acceptable)	
I	Hollywood	FL	33020	
_	City	State	Zip	
Having been named as registered ages place designated in this certificate, I h further agree to comply with the provi am familiar with and accept the oblige	ereby accept the appo sions of all statutes re ations of my position o	pintment as re clating to the as registered	egistered agent and agree to ac proper and complete performa agent as provided for in Chapt Signature (REQUIRED)	ct in this capacity. I ince of my duties, and I

ARTICLE IV-

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

"AMBR" = A		Name and Address:	
	Authorized Member		
"MGR" = M	anager		
MGR	<u> </u>	Kevin Plotkin, Esq. 2500 Hollywood Blvd., Suite 202	
		Hollywood, FL 33020	
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(Use attachi	ment if necessary)		
E 17. Effect	ive does if other than	the date of filing: 01/29.2025 ((OPTIONAL)
LE V: Effect fective date i of filing.) f the date ins	ive date, if other than s listed, the date mu	the date of filing: 01/29.2025 ast be specific and cannot be more than five business of the specific and cannot be statutory filing requirement artment of State's records.	uays prior to or 30 day
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Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)