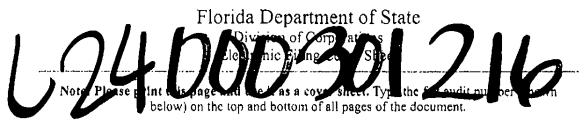
Division of Corporations

7/9/24, 10:48 AM



(((H24000232596 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet

To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : MORAN KIDD LYONS JOHNSON, P.A.

Account Number : I20000000003 : (407)841-4141 Phone : (407)841-4148 Fax Number

**Enter the email address for this business entity to be used for future; annual report mailings. Enter only one email address please. **

Email Address:

FLORIDA LIMITED LIABILITY CO. CAPSHADOW, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

Electronic Filing Menu

Corporate Filing Menu

Help

(((H24000232596 3)))

ARTICLES OF ORGANIZATION OF CAPSHADOW, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Revised Limited Liability Company Act, F.S. Chapter 605, hereby makes, acknowledges, and files the following Articles of Organization.

ARTICLE I

Name. The name of the limited liability company shall be CAPSHADOW, LLC ("Company").

ARTICLE II

Address. The mailing address and street address of the principal office of the Company shall be 2490 Aurora Road, Melbourne, FL 32935

ARTICLE III

<u>Duration</u>. The Company shall commence its existence on the date these Articles of Organization are filed by the Florida Department of State. The Company's existence shall be perpetual unless the Company is earlier dissolved as provided in the operating agreement of the Company.

ARTICLE IV

Initial Registered Office and Agent. The street address of the initial registered office of the Company is 2490 Aurora Road, Melbourne, FL 32935 and the name of the initial registered agent of the Company at that address is BRYAN PRICE.

ARTICLE V

Management. The Company shall be managed by a manager or managers in accordance with an operating agreement adopted by the members for the management of the business and affairs of the Company. The operating agreement may contain any provisions for the regulation and management of the affairs of the Company not inconsistent with law or these Articles of Organization. The name and address of the initial manager(s) of the Company is/are:

SECRE MARY OF STATE INTERPRETATIONS

NAME

<u>ADDRESS</u>

Bryan Price

2490 Aurora Road Melbourne, FL 32935 (((H24000232596 3)))

IN WITNESS WHEREOF, the undersigned does set his hand and seal and has acknowledged and filed the foregoing Articles of Organization under the laws of the State of Florida this 3rd day of July, 2024

Bryan Pao Manager (((H24000232596 3)))

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

CAPSHADOW, LLC

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES, THE UNDERSIGNED SUBMITS THE FOLLOWING STATEMENT ACCEPTING APPOINTMENT AS REGISTERED AGENT IN THE STATE OF FLORIDA:

- 1. The name of the limited liability company is CAPSHADOW, LLC
- 2. As designated in the Articles of Organization filed with this certificate, the name and the Florida street address of the registered agent is:

Bryan Price 2490 Aurora Road Melbourne, FL 32935

3. The street address of the registered office and the street address of the business office of the registered agent are identical.

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.

Bryan Price

July 3th, 2024