

Florida Department of State

Division of Corporations
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To:
Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : GRANT, COTTRELL & MILLER-MEYERS, PLLC
Account Number : I20200000034
Phone : (239)649-4848
Fax Number : (239)643-9810

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

Email Address: Jfaccone@pelicanbayrealty-fl.com

FLORIDA LIMITED LIABILITY CO. 25- JOHN ST, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

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MS

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ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I
NAME

The name of the Limited Liability Company is:

25-JOHN ST, LLC

ARTICLE II
ADDRESS

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

Principal Office:
5051 Castello Drive, Suite 30
Naples, FL 34103

Mailing Address:
5051 Castello Drive, Suite 30
Naples, FL 34103

ARTICLE III
DURATION

The period of duration for the Limited Liability Company shall be indefinite.

ARTICLE IV
MANAGEMENT

The Limited Liability Company is to be managed by Managing Members and the name and address of such Managing Members are:

JMTF, LLC
5051 Castello Drive, Suite 30
Naples, FL 34103

ARTICLE V
ADMISSION OF ADDITIONAL MEMBERS

Upon unanimous approval by the Members, the Company is authorized to issue additional Units in the Company and to admit Additional Members to the Company.

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ARTICLE VI
MEMBERS' RIGHTS TO CONTINUE BUSINESS

The remaining members of the company shall have the right to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company.


ARTICLE VII
REGISTERED AGENT

The name and address of the registered agent is:

JMTF, LLC
5051 Castello Drive, Suite 30
Naples, FL 34103

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 605.0113, Florida Statutes.

REGISTERED AGENT:




JOSEPH FACCONI, as managing member
of JMTF, LLC

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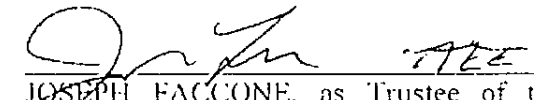
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These Articles are executed this 29th day of April 2024 by the undersigned Initial Member of 25-JOHN ST, LLC, pursuant to Section 605.0203(1)(b) of the Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

MANAGING MEMBERS:


JOSEPH FACCONE, as managing member
of JMTF, LLC


MICHAEL FACCONE, as managing
member of JMTF, LLC


JOSEPH FACCONE, as Trustee of the
THOMAS FACCONE LIVING TRUST
U/D/A June 25, 2002, as managing member
of JMTF, LLC

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