# 125000034947

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #)	<u></u>
PICK-UP WAIT M	AIL
(Business Entity Name)	
(Document Number)	
Certified Copies Certificates of Status _	
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DECEMBED.

# FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

1/29/25

NAME: COLUMBUS 77 LLC

TYPE OF FILING: ARTICLES

COST:

125.00

RETURN: PLAIN COPY PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Columbus 77 LLC (Must cor	ntain the words "Limited L	iability Company, "	L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street	address of the principal of	fice of the Limited I	Liability Company is:	
Princi	pal Office Address:		Mailing Address:	
1317 Edgewater Dr	· :-		Street Suite 2050	
Orlando, FL 32804		San D	Diego, CA 92101	<u> </u>
The Limited Liability Compar mother business entity with an	ny cannot serve as its own nactive Florida registratio	n.)	t's Signature: ou must designate an individual or	(g),
The Limited Liability Compar mother business entity with an	ny cannot serve as its own nactive Florida registratio	Registered Agent, Y n.) agent are: PORATED		
The Limited Liability Compar another business entity with an	ny cannot serve as its own a active Florida registration address of the registered PARACORP INCOR	Registered Agent, Y n.) agent are: PORATED Name		
	ny cannot serve as its own a active Florida registration address of the registered PARACORP INCOR	Registered Agent. Y n.) agent are: PORATED Name ve, 1st Floor	ou must designate an individual or	
The Limited Liability Compar another business entity with an	ny cannot serve as its own a active Florida registration address of the registered PARACORP INCOR  155 Office Plaza Driv Florida street address	Registered Agent, Y n.)  agent are:  PORATED  Name  ve, 1st Floor s (P.O. Box NOT according to the control of t	ou must designate an individual or	in the second
The Limited Liability Compar mother business entity with an	py cannot serve as its own a active Florida registration address of the registered PARACORP INCOR  155 Office Plaza Driving Florida street address  Tallahassee	Registered Agent. Y n.) agent are: PORATED Name ve, 1st Floor s (P.O. Box NOT acc	ceptable)	
The Limited Liability Comparinother business entity with an	pay cannot serve as its own a active Florida registration address of the registered PARACORP INCOR  155 Office Plaza Driving Florida street address  Tallahassee  City	Registered Agent. Y n.)  agent are:  PORATED  Name  ve, 1st Floor s (P.O. Box NOT according to the state)	ou must designate an individual or	(1) (1)

(CONTINUED)

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Sammy Silva
	67349 Gist Road
	Bend. OR 97703
MGR	Miguel Angel Brizuela Gonzalez
	1804 Garnet Avenue, #188 San Diego, CA 92109
	Sali Diego, CA 92109
	$(\cdot)_{t}$ .
	- Comment
	\$
(Use attachment if necessary)	
effective date is listed, the date must ite of filing.)  If the date inserted in this block does	be date of filing:
CLE V: Effective date, if other than the effective date is listed, the date must ate of filing.)  If the date inserted in this block does becument's effective date on the Depart	be specific and cannot be more than five business days prior to or 90 days s not meet the applicable statutory filing requirements, this date will not be b
CLE V: Effective date, if other than the effective date is listed, the date must ate of filing.)  If the date inserted in this block does becument's effective date on the Depart	be specific and cannot be more than five business days prior to or 90 days s not meet the applicable statutory filing requirements, this date will not be b
CLE V: Effective date, if other than the effective date is listed, the date must ate of filing.)	be specific and cannot be more than five business days prior to or 90 days s not meet the applicable statutory filing requirements, this date will not be b
CLE V: Effective date, if other than the effective date is listed, the date must ate of filing.)  If the date inserted in this block does ocument's effective date on the Depart CLE VI: Other provisions, if any.  REQUIRED SIGNATURE:	be specific and cannot be more than five business days prior to or 90 days s not meet the applicable statutory filing requirements, this date will not be b

Filing Fees:

Typed or printed name of signee

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

## STATE OF FLORIDA

#### REGISTERED AGENT CONSENT FORM

DATE: 01/29/2025

ENTITY NAME: COLUMBUS 77 LLC

#### REGISTERED AGENT NAME AND ADDRESS:

Paracorp Incorporated 155 Office Plaza Drive, 1st Floor Tallahassee, FL 32301

Paracorp Incorporated, having been designated to act as Statutory Agent, hereby consents to act in the capacity for the above-referenced entity until removed or resignation is submitted in accordance with the Florida Revised Statues.

Leticia Herrera, Assistant Secretary

Paracorp Incorporated