

L25000055021

(Requestor's Name)

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(Address)

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CSC - Tallahassee  
1201 Hays Street  
Tallahassee, FL 32301-2607  
850-558-1500, Ext: x61563

To: Department Of State, Division Of Corporations  
From: Shauna Godbolt  
Ext: x61563  
Date: 02/10/25  
Order #: 1820240-1  
Re: 184 BUTLER PROMOTE, LLC  
Processing Method: Routine

TO WHOM IT MAY CONCERN:

Enclosed please find:

Certificate of Formation/Incorporation

Amount to be deducted from our State Account: \$125.0 - FL State Account Number:  
I200000000195

Please take the following action:

File in your office on basis  
Issue Proof of Filing

Special Instructions:

Thank you for your assistance in this matter. If there are any problems or questions with this filing, please call our office.

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**ARTICLES OF ORGANIZATION**  
**FOR**  
**FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I**  
**Name**

The name of this Limited Liability Company is  
**184 BUTLER PROMOTE, LLC**

**ARTICLE II**  
**Address**

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

333 South Garland Avenue, Suite 1300  
Orlando, FL 32801

**ARTICLE III**  
**Purpose**

This Limited Liability Company is organized for the purposes of any lawful business under Chapter 605, Florida Statutes.

**ARTICLE IV**  
**Management**

This Limited Liability Company is to be managed by one or more managers and is, therefore, a "manager-managed" limited liability company.

**Manager:** The Wideman Company, LLC, 333 South Garland Avenue, Suite 1300, Orlando, Florida 32801

**ARTICLE V**  
**Registered Agent, Registered Office & Registered Agent's Signature**

The name and the Florida street address of the Registered Agent of this Limited Liability Company is:

CORPORATION SERVICE COMPANY  
1201 HAYS STREET  
TALLAHASSEE, FLORIDA 32301

*Having been named as registered agent to accept service of process for this limited liability company at the place so designated in these Articles of Organization, the undersigned hereby accepts this appointment and agrees to act in this capacity. The undersigned agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties and is familiar with and accepts the obligations of the undersigned's position as registered agent, as provided for in Chapter 605, Florida Statutes.*

**REGISTERED AGENT'S SIGNATURE**

*Shauna Godbolt*

*In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third-degree felony as provided in Section 817.155, Florida Statutes.*

**AUTHORIZED REPRESENTATIVE'S SIGNATURE**

DocuSigned by:

**CHRISTOPHER WIDEMAN**

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Christopher Wideman, Authorized Representative

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