## 49000285887

(Re	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer

Office Use Only



100337719801

SEL : VIIII III

) - 1. 2019 N. J. Will May CORPORATION SERVICE COMPANY 1201 Hays Street

Tallhassee, FL 32301 Phone: 850-558-1500

Phone: 850-558-1500
ACCOUNT NO. : 12000000195
REFERENCE : 075731 7227993
AUTHORIZATION: Spelle le man
COST LIMIT (: \$ 160.00
ORDER DATE : December 4, 2019
ORDER TIME : 10:01 AM
ORDER NO. : 075731-015
CUSTOMER NO: 7227993
DOMESTIC FILING
NAME: FPIP XXIV, LLC
EFFECTIVE DATE:
ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP  XX ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX CERTIFIED COPY 7
PLAIN STAMPED COPY  XX CERTIFICATE OF GOOD STANDING ,
CONTACT PERSON: Amanda Robinson - EXT. 62968
EXAMINER'S INITIALS:

## COVER LETTER

	New Filing Section Division of Corporations		
SUBJEC	FPIP XXIV, LLC		
SUBJEC	T:Name of	Limited Liabil	ity Company
The encid	nsed Articles of Organization and fee(s)	are submitted	for filing.
Please re	turn all correspondence concerning this	matter to the f	ollowing:
	David Kahan, Esq.		
		Name of	Person
	David Kahan, P.A.		
		Firm/Co	mpany
	6420 Congress Ave., Suite 1800		
		Addr	ess
	Boca Raton, Florida 33487	<del></del>	
	tmorgan@morgancos.com	City/State an	d Zip Code
	E-mail address: (to be us	sed for future a	innual report notification)
For further	information concerning this matter, ple	ease call:	
	David Kahan	561 (	672-8330
	Name of Person	\ <del></del>	Daytime Telephone Number
Enclosed	is a check for the following amount:		
\$125.00	Filing Fee \$130.00 Filing Fee & Certificate of Status	LCertifi	on Filing Fee & S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liabili	ty Company is:	·	
FPIP XXIV, LLC (Must con	tain the words "Limited Li	ability Company	, "L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street a	iddress of the principal off	ice of the Limited	d Liability Company is:
<u>Princip</u>	oal Office Address:		Mailing Address:
13024 Ballantyne C Charlotte, NC 2827	orporate Place, Suite 500		024 Ballantyne Corporate Place, Suite 500 arlotte, NC 28277
another business entity with an  The name and the Florida street	address of the registered a		
	6420 Congress Avc., S	Suite 1800	
	Florida street address		acceptable)
	Boca Raton	FL	33487
	City	State	Zip
place designated in this certificate further agree to comply with the p	e, I hereby accept the appoint provisions of all statutes cell bligations of my position as	intment as registe ating to the prope s registered agent	te above stated limited liability company at the red agent and agree to act in this capacity. I er and complete performance of my duties, and e as provided for in Chapter 605, F.S

(CONTINUED)

2019 DEC -5 AHII: 14

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
'MGR" = Manager	
MGR	George A. Morgan, Jr.
	13024 Ballantyne Corporate Place, Suite 500
	Charlotte, North Carolina 28277
MGR	George A. Morgan, III
<del></del>	13024 Ballantyne Corporate Place, Suite 500
	Charlotte, North Carolina 28277
V: Effective date, if other than the date of the date is listed, the date must be specifiling.)  the date inserted in this block does not me	of filing:
E V: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) the date inserted in this block does not ment's effective date on the Department of	cific and cannot be more than five business days prior to or 96 cet the applicable statutory filing requirements, this date will no
E V: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) the date inserted in this block does not menent's effective date on the Department of	cific and cannot be more than five business days prior to or 96 cet the applicable statutory filing requirements, this date will no
ctive date is listed, the date must be spec f filing.) the date inserted in this block does not me ment's effective date on the Department of EVI: Other provisions, if any.	cific and cannot be more than five business days prior to or 96 cet the applicable statutory filing requirements, this date will no
V: Effective date, if other than the date of the date is listed, the date must be specifiling.) the date inserted in this block does not meent's effective date on the Department of VI: Other provisions, if any.	cific and cannot be more than five business days prior to or 96 cet the applicable statutory filing requirements, this date will no
V: Effective date, if other than the date of the date is listed, the date must be specifiling.) the date inserted in this block does not meent's effective date on the Department of VI: Other provisions, if any.	ecific and cannot be more than five business days prior to or 96 eet the applicable statutory filing requirements, this date will no f State's records.
E.V: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) the date inserted in this block does not ment's effective date on the Department of EVI: Other provisions, if any.  REQUIRED SIGNATURE:	ecific and cannot be more than five business days prior to or 96 eet the applicable statutory filing requirements, this date will no f State's records.
V: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) the date inserted in this block does not metern's effective date on the Department of VI: Other provisions, if any.  Signature of a men This document is execute	ecific and cannot be more than five business days prior to or 90 ect the applicable statutory filing requirements, this date will not f State's records.  The property of a member of a me
V: Effective date, if other than the date of the date is listed, the date must be specifiling.) the date inserted in this block does not metern's effective date on the Department of VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a men This document is execute I am aware that any false is	ecific and cannot be more than five business days prior to or 90 ect the applicable statutory filing requirements, this date will not f State's records.  The property of a member, doing accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State.
EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) the date inserted in this block does not meet seffective date on the Department of EVI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a men This document is execute I am aware that any false is	ecific and cannot be more than five business days prior to or 96 ect the applicable statutory filing requirements, this date will no f State's records.
V: Effective date, if other than the date of citive date is listed, the date must be specifiling.) the date inserted in this block does not metert's effective date on the Department of VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a men This document is execute I am aware that any false is constitutes a third degree:	et the applicable statutory filing requirements, this date will not f State's records.  The program authorized representative of a member, this accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.
EV: Effective date, if other than the date of ctive date is listed, the date must be specifiling.) the date inserted in this block does not meet seffective date on the Department of EVI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a men This document is execute I am aware that any false is	et the applicable statutory filing requirements, this date will not f State's records.  There or an authorized representative of a member.  The original statutes of a member of state information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.
V: Effective date, if other than the date of citive date is listed, the date must be specifiling.) the date inserted in this block does not metert's effective date on the Department of VI: Other provisions, if any.  REQUIRED SIGNATURE:  Signature of a men This document is execute I am aware that any false is constitutes a third degree:	et the applicable statutory filing requirements, this date will not f State's records.  The program authorized representative of a member, this accordance with section 605.0203 (1) (b), Florida Statutes, information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.
V: Effective date, if other than the date of the date is listed, the date must be specifiling.) he date inserted in this block does not meent's effective date on the Department of VI: Other provisions, if any.  Signature of a men This document is execute I am aware that any false is constitutes a third degree George A. Morgan	et the applicable statutory filing requirements, this date will not f State's records.  There or an authorized representative of a member.  The original statutes of a member of state information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.