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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

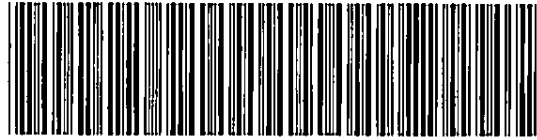
(Business Entity Name)

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STATE OF FLORIDA

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TALLAHASSEE, FLORIDA

Incorporating Services, Ltd.

1540 Glenway Drive
Tallahassee, FL 32301
850.656.7956
Fax: 850.656.7953
www.incserv.com
e-mail: accounting@incserv.com



ORDER FORM

TO Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

FROM Melissa Moreau
mmoreau@incserv.com
850.656.7953

REQUEST DATE 11/15/2021 **PRIORITY** Regular Approval **OUR REF.# (Order ID#)** 966362

ORDER ENTITY
ADDSFP HAWKS RIDGE, LLC

PLEASE PERFORM THE FOLLOWING SERVICES:
ADDSFP HAWKS RIDGE, LLC (FL)

Please file the attached articles and provide a certified copy.

NOTES:
\$155.00 Authorized
Email address for annual report reminders: **radiv@incserv.com**

RETURN/FORWARDING INSTRUCTIONS:
ACCOUNT NUMBER: I20050000052

Please bill the above referenced account for this order.

If you have any questions please contact me at 656-7956,

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

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SECRETARY OF STATE
TALLAHASSEE, FL

**ARTICLES OF ORGANIZATION
OF
ADDSFP HAWKS RIDGE, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Florida Statutes Chapter 605.0112, as amended, hereby makes, acknowledges and files the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company is ADDSFP Hawks Ridge, LLC (the "Company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Company is 355 Alhambra Circle, Suite 1450, Coral Gables, Florida 33134.

ARTICLE III - REGISTERED OFFICE AND AGENT AND ADDRESS

The name and street address of the registered agent and the registered office of the Company in the State of Florida are:

<u>Name:</u>	<u>Address:</u>
Incorporating Services, Ltd.	1540 Glenway Drive Tallahassee, Florida 32301

Article IV – Officers

The names, titles and addresses of the persons authorized to manage and control the limited liability company are:

<u>Name:</u>	<u>Address:</u>
Pedro Alvarez, Manager	355 Alhambra Circle, Suite 1450 Coral Gables, Florida 33134
Alberto J. Delgado, Manager	355 Alhambra Circle, Suite 1450 Coral Gables, Florida 33134
Albert Diaz-Silveira, Manager	355 Alhambra Circle, Suite 1450 Coral Gables, Florida 33134
Manuel A. Fernandez, Manager	355 Alhambra Circle, Suite 1450 Coral Gables, Florida 33134

Will Prince, Manager

355 Alhambra Circle, Suite 1450
Coral Gables, Florida 33134

IN WITNESS WHEREOF, the undersigned has made and subscribed these Articles of Organization for the foregoing uses and purposes this 15th day of November, 2021.

By: 

Name: Manuel A. Fernandez

Title: Authorized Person

REGISTERED AGENTS ACCEPTANCE

Having been named as registered agent and to accept service of process for ADDSFP Hawks Ridge, LLC at the place designated in this certificate, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his duties, and is familiar with and accepts the obligations of his position as registered agent as provided for in Chapter 605, Florida Statutes.

Dated: November 15, 2021

By: Melissa A. Mascan
Print Name: Incorporating Services, Ltd.

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CLERK OF THE STATE
OF FLORIDA, ST. JOHNS COUNTY