

CT CORPORATION SYSTEM

CORPORATION(S) NAME

L00000015439

Reflection Equities LLC

000002500380--5

12/13/00--01035--008

***160.00 ***160.00

☐ Profit

☐ Amendment

☐ Merger

☐ Nonprofit

☐ Dissolution/Withdrawal

☐ Mark

☒ Foreign

☐ Reinstatement

☐ Limited Partnership

☐ Annual Report

☐ Other

☒ LLC

☐ Name Registration

☐ Change of RA

☐ Fictitious Name

☐ UCC

☒ Certified Copy

☐ Photocopies

☒ CUS

☐ Call When Ready

☐ Call If Problem

☐ After 4:30

☒ Walk In

☐ Will Wait

☒ Pick Up

☐ Mail Out

Name

12/13/00

Order#: 3470069

Availability

Document

Examiner

Updater

Verifier

W.P. Verifier

Ref#:

Amount: \$

RECEIVED
00 DEC 13 PM 2:55
DIVISION OF CORPORATION

00 DEC 13 PM 2:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

JB
12-13-00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Reflection Equities LLC

ARTICLE II - Address:

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

3399 PGA Blvd., Suite 450, Palm Beach Gardens, Florida 33410

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

Peter D. Cummings & Associates, Inc.

Name

3399 PGA Blvd., Suite 450

Florida street address (P.O. Box **NOT** acceptable)

Palm Beach Gardens FL 33410

City, State, and Zip

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 608, F.S..

Peter D. Cummings & Associates, Inc.

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

DAVID A. DEAN

Typed or printed name of signer

FILING FEES:

- \$ 100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (OPTIONAL)
- \$ 5.00 Certificate of Status (OPTIONAL)