



L010000020177

ACCOUNT NO. : 072100000032

REFERENCE : 384934 7291942

AUTHORIZATION :

Patricia Pigute

COST LIMIT : \$ 125.00

ORDER DATE : November 9, 2001

ORDER TIME : 12:47 PM

ORDER NO. : 384934-001

CUSTOMER NO: 7291942

CUSTOMER: Mr. Perry S. Solomon
Mr. Perry S. Solomon

200004691062--4

410 Alcazar Avenue

Coral Gables, FL 33134

DOMESTIC FILING

NAME: TROPIC HOME MARKETING, LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Norma Hull - EXT. 1115

EXAMINER'S INITIALS:

DIVISION OF CORPORATION

RECEIVED 01 NOV 21 AM 11:16
01 NOV 21 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
AND
FILED

VB
11-21

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TROPIC HOME MARKETING, LLC

ARTICLE II - Address:

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

410 ALCAZAR AVENUE, CORAL GABLES, FLORIDA 33134

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

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

Corporation Service Company
Name
1201 Hays Street
Florida street address (P.O. Box **NOT** acceptable)
Tallahassee FL 32301
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.

Corporation Service Company

By:

Laura R. Dunlap

Registered Agent's Signature

Laura R. Dunlap
as its agent

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)

Laura R. Dunlap
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.)

LAURA R. DUNLAP

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)

APPROVED
AND
FILED
01 NOV 21 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MANAGING MEMBERS OF

TROPIC HOME MARKETING, LLC

Perry S. Solomon
Managing Member

410 Alcazar Avenue
Coral Gables, Florida 33134

APPROVED
AND
FILED

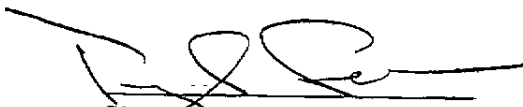
01 NOV 21 AM 11:16

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

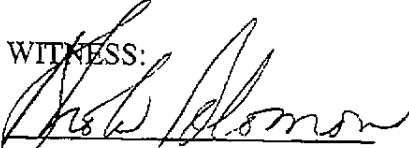
LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Florida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of TROPIC HOME MARKETING, LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

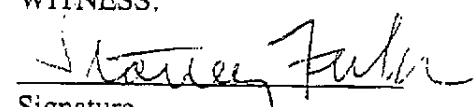
This Limited Power of Attorney is executed on this 19 day of ~~NOVEMBER~~ 2001.


SignaturePerry S. Solomon
Print Name of Signer

WITNESS:


SignatureShari L. Solomon
Print Name of Witness

WITNESS:


SignatureStanley Ferber
Print Name of Witness01 NOV 21 AM 11:16
SECRETARY OF STATE
TALLAHASSEE, FLORIDARECEIVED
AND
FILED