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FLORIDA  
CORPORATIONS  
TALLAHASSEE, FLORIDAFlorida Department of State  
Division of Corporations  
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## To:

Division of Corporations  
Fax Number : (850) 205-0383

## From:

Account Name : PARCORP SERVICES, LTD.  
Account Number : I19990000011  
Phone : (800) 603-2533  
Fax Number : (800) 398-0461

DIVISION OF CORPORATIONS

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**LIMITED LIABILITY COMPANY****ALTERNATIVE REAL ESTATE SOLUTIONS, LLC**

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Fax Audit No. (((H02000215697 2 )))

STATE OF FLORIDA - ARTICLES OF ORGANIZATION OF  
ALTERNATIVE REAL ESTATE SOLUTIONS, LLC

Pursuant to s. 608.407, Florida Statutes.

## ARTICLE I - Name:

The name of the Limited Liability Company is:

**ALTERNATIVE REAL ESTATE SOLUTIONS, LLC**

## ARTICLE II - Address:

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

**9708 AVALON WOODS DRIVE, WINTER GARDEN, FL 34787**

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

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

**RICHARD C. LAWRENCE**

Name

**9708 AVALON WOODS DRIVE**Florida street address (P.O. Box NOT ACCEPTABLE)**WINTER GARDEN, FL 34787**

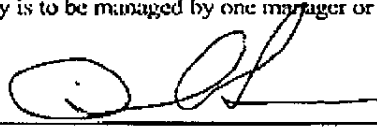
(City, State and Zip)

*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 608, F.S.*

  
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.

  
Signature of a member or 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 L. SURINA**

Typed or Printed name of signer

## Preparer Info:

Parcorp Services, Ltd. / David L. Surina  
931 W. 75th Street, Sto. 137-317, Naperville, IL 60565 / (800) 603-2533

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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507 FLORIDA  
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE  
FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND  
REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

**ALTERNATIVE REAL ESTATE SOLUTIONS, LLC**

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

**RICHARD C. LAWRENCE**

Name

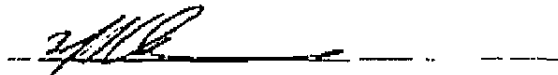
**9708 AVALON WOODS DRIVE**

Florida street address (P.O. Box NOT ACCEPTABLE)

**WINTER GARDEN, FL 34787**

City, State and Zip

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Registered Agent **RICHARD C. LAWRENCE**

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