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Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	·
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SECRETAR (OF STATE TALLAHASSEE, FLORID

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TRANSMITTAL LETTER

TO: Registration Se				***
SUBJECT:	PARKSIDE F	OUR, LLC.		*:_
The enclosed Articles of	Organization and fee(s) are su	bmitted for filing.		
Please return all correspondence	ondence concerning this matter	belga - Lee Jame of Person		PILED 2004 DEC 28 AF SECRETASSEE.
,	901 Parks	itm/Company) idl Ordl 1 (Address)	with	M 8. 27
	Boca 1	State and Zip Code)	3486	·
Olga (concerning this matter, please of Person) Concerning this matter, please of Person	call: at (Area Code & Daytime Te	5-93390V	(561) 391-554
Enclosed is a check for	or the following amount:			
\$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$160.00 Filing Fe Certificate of Status & Certified Copy (additional copy is enclose	t
_	ET ADDRESS:	MAILING A Registration S		

Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

Ellerse return to The enclosed prepaid Privity Mail envelope. F

ARTICLES OF ORGANIZATION FOR FLORID A LIMITED LIABILITY COMPANY

ARTICLE I - NAME:

The name of the Limited Liability Company is: PARKSIDE FOUR, L.L.C.

ARTICLE II - ADDRESS:

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

Principal Office Address:

Mailing Address:

955 S.W. 21st Way Boca Raton, Florida 33486 955 S.W. 21st Way Boca Raton, Florida 33486

ARTICLE III - REGISTERED AGENT:

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

Oscar Fumagali 955 S.W. 21st Way Boca Raton, Florida 33486

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 apoitnment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to eh proper and complete performance of my duties, and I am familiar with and accept the obligation of my position as registered agent as provided for in Chapter 60% F.S.

Registered Agent's Signature

ARTICLE IV - Manager(s) and/or Managing Members:

The name and address of each Manager or Managing Member is as follows:

Title:

Name and Address:

Manager

Oscar Fumagali 955 S.W. 21st Way

Boca Raton, Florida 33486

Managing Member

Robert Storch 2225 SW 16th Place

Boca Raton, Florida 33486

Managing Member

Eric Lee

901 Parkside Circle North Boca Raton, Florida 33486

Managing Member

Steven Brackett

930 Parkside Circle North Boca Raton, Florida 33486

REQUIRED SIGNATURES:

Oscar Fumagali

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

Robert Storch

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

Lin Lee

Éric Lee

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

Steven Brackett

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