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LOS-1642

TRANSMITTAL LETTER

TO: Registration Section Division of Corporations	
SUBJECT: SUNSHINE	REALTY HOLDINGS, LLC
(Name of Limite	ed Liability Company)
The enclosed Articles of Organization and fee(s) are s	submitted for filing.
Please return all correspondence concerning this matter	er to the following:
JAMES F	- York
(Name of Person)
SUNSHINE	REACTY SENVICES, INC.
	(Firm/Company)
277 - NE	(Address)
	(Address)
L16HTH0-31	E Parat, FC 33064 (State and Zip Code)
(City	/State and Zip Code)
For further information concerning this matter, please	call:
JAMES F. York	at (56/) 998 - 9326 (Area Code & Daytime Telephone Number)
(Name of Person)	(Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:	LECRE A
☐ \$125.00 Filing Fee	Certified Copy (additional copy is enclosed) \$160.00 Filing Fee Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
STREET ADDRESS:	MAILING ADDRESS:
Registration Section Division of Corporations	Registration Section Division of Corporations
409 E. Gaines Street Tallahassee, Florida 32399	P.O. Box 6327 Tallahassee, Florida 32314
Tananassee, Propa sees	i alianassee, i mila sesta

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SUNSHINE REALTY HOLDINGS, LLC

ARTICLE II - Address:

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

Thicipal Office Address:	<u>waning Address:</u>
2710 NE 5314 COUNT	2170 NE 531d C.
LIGHTHOUSE DOINT, FC	Lighthouse Point, A

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

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

Name

277 = NE 536 Co-rf

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

LIGHTH-USE POINT FL 33064

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, E.S.

Registered Agent's Signature

(CONTINUED)

ARTICLE IV- Manager(s) or Managing Member(s):

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

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGRM	JAMES F. YORK 2710 NE 53H Court Light house Point, Fi 3306
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and the second s	
 	
(Use attachment if necessary)	
NOTE: An additional article must be	added if an effective date is requested.
REQUIRED SIGNATURE:	

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.)

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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SECRETARY OF STATE
SECRETARY OF STATE