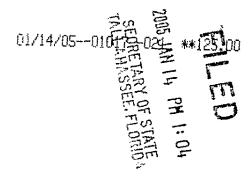
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## TRANSMITTAL LETTER

Division of Co				
SUBJECT: Q His	gh Vista, LLC			
		d Liability Company)		
The enclosed Articles of	of Organization and fee(s) are s	ubmitted for filing.		
Please return all corresp	condence concerning this matte	er to the following:		
	William A	A. Quinlan, Jr.		
<del>-</del> "	Õ	Name of Person)		
	. (	Firm/Company)		
	536 S. La	ke Starr Blvd. (Address)		*
		es, FL 33898 (State and Zip Code)	<u> </u>	
For further information	concerning this matter, please	call:	T. 20	
William A. Quinlan, Jr		at (863 ) 412-7796	SECRETARY OF ST. PH. I. Selephone Number) ASSEE, FL.	T
(Name	e of Person)	(Area Code & Daytime To	elephone Number)	
Enclosed is a check for	or the following amount:		PA PA	
<b>3</b> \$125.00 Filing Fee	□ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Regis Divis	EET ADDRESS: tration Section ion of Corporations . Gaines Street	MAILING A Registration S Division of Co P.O. Box 632	Section orporations	

Tallahassee, Florida 32314

Tallahassee, Florida 32399

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Compa	any is:
Q High Vista, LLC	
ARTICLE II - Address: The mailing address and street address of	the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
536 S. Lake Starr Blvd.	536 S. Lake Starr Blvd.
Lake Wales, FL 33898	Lake Wales, FL 33898
Willia	nm A. Quinlan, Jr.  Name
536 S	. Lake Starr Blvd.
Florida s	treet address (P.O. Box NOT acceptable)
I lorida s	are addition (1.0. Dear 1.0. are appearance)
	Wales, FL 33898
Lake	· · · · · · · · · · · · · · · · · · ·

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manag "MGRM" = Man	•	Name and Address:		
MGRM		William A. Quinlan, Jr.	<u></u>	*
• -		536 S. Lake Starr Blvd.		
e e e e e e e e e e e e e e e e e e e	ing the second of the second o	Lake Wales, FL 33898		
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(Use attachment	if necessary)			
NOTE: An add	itional article must be a	added if an effective date is requested.		
REQUIRED SIG	GNATURE:			
<del></del>	Nolleon A Signature of a member or	an authorized representative of a member.		
		608.408(3), Florida Statutes, the execution an affirmation under the penalties of perjury in are true.)	2005 SEC	i i i
	Wi	lliam A. Quinlan, Jr.		
		or printed name of signee	z <del>z</del>	-
	••	, i	₹ ₹	1
Filing Fees:		ر ان ان ا	의 공	T

\$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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