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#### Doak S. Campbell, III

ATTORNEY AT LAW 70 SE FOURTH AVENUE DELRAY BEACH, FLORIDA 33483

TELEPHONE 561/278-1890

FAX NUMBER 561/276-5803

May 05, 2005

Secretary of State Division of Corporations 409 East Gains street, Tallahassee, Fl 32399

Re: CANOPY 934, LLC.

Gentlemen:

Enclosed please find Articles of Organization for CANOPY 934, LLC, together with a check in the amount of \$ 125.00 that needs to be filed.

Thank you for your attention to this matter.

Sincerely yours,

Doak S. Campbell, III

Rm.

#### ARTICLES OF ORGANIZATION FOR CANOPY 934, LLC

#### ARTICLE I - Name:

The name of the Limited Liability Company is: CANOPY 934, LLC

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 110 NE 7<sup>th</sup> Street, Delray Beach, Florida 33444.

#### ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

#### PERPETUAL

#### ARTICLE IV - Management

The Limited Liability Company is to be managed by manager(s) and the name and address of such initial Manager who is to serve as manager is: Garrow Throop, No. 12 Jenison St., Newtonville, MA 02460.

#### ARTICLE V – Members and Admission of Additional Members

The initial members of the LLC shall be Garrow Throop, No. 12 Jenison St., Newtonville, MA 02460 and Lois Brezinski, 110 NE 7<sup>th</sup> Street, Delray Beach, Fl 33444.

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be:

Additional members may be added upon approval of all of the members of Canopy 934, LLC with the payment of the value of the interest acquired, as set by the Manager.

#### ARTICLE VI - Members Rights to Continue Business

The right, if given, of the remaining members of the Limited Liability Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership in the Limited Liability Company shall be:

Granted to the remaining members upon payment of the value of the terminated member's interest as defined by the Manager.

#### ARTICLE VII - Amendment

This Limited Liability Company reserves the right to amend or repeal any provisions contained in these Articles of Organization or any amendment hereto, and any right conferred upon the shareholder(s) is subject to this reservation.

#### ARTICLE VIII - Bylaws

The bylaws may be adopted, altered, amended or repealed by either the members or the Board of Directors, if the members choose to elect a separate Board of Directors, but the Board of Directors may not amend or repeal any bylaw adopted by members if the members specifically provide such bylaws are not subject to amendment or repeal by the directors.

IN WITNESS WHEREOF, the undersigned incorporator has executed these Articles of Organization

this Haday of April, 2005.

Garrow Throop

Incorporator

/Lois Brezinski

Incorporator

STATE OF PARTY MASS.
COUNTY OF PARTY OF PARTY.

BEFORE ME, a Notary Public authorized to take acknowledgments in the State and County set forth above, personally appeared Garrow Throop and Lois Bestate, who personally known to me, and they acknowledged before me that they executed these Articles of Organization.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed by Official Seal, in the State and County aforesaid, this 37 day of April 2005

Notary Public

My commission expires: /2

## <u>Acknowledgement</u>

State of Florion	·		
County of Salaban ch	<u>.                                    </u>		
On <u>4-29-05</u> , before m Personally appeared <u>LDI</u>	e Michaele	Notary Public	
Personally known to me (or evidence) to be the person (sinstrument and acknowledgin his/her/their authorized signature(s) on the instrume	s) whose name (s) is gement to me that h capacity (ies), and	s/are subscribed to the u he/she/they executed the that by his/her/their	
pon behalf of which the per the instrument.		<del>-</del>	
Witness my hand and offic		Michael E. Commission I Borded Atlantic Bonder	13, 2015 Thru
My commission expires ?-!	<u>V</u> \_,Notary Public	<b>,</b>	
Description of attached Do	ocuments		
Title or Type of Document:			
Document Date:	Number of Pag	jes:	
Signer(s) other than Names	, •		1035 M/N -

### 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 IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

CANOPY 934, LLC

2. The name and address of the registered agent and office is:

LOIS BREZINSKI

110 NE 7tah Street, Delray Beach, Florida 33444

ois Brezinski

Garrow Throop

10:00

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.

Lois Brezinski

Date: 41 W F 1, 2005