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## Florida Department of State

Division of Corporations Public Access System

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> RBC 29088

Tor

Division of Corporations

Fax Number

: (850)205-0383

From:

M. IVES

Account Name : BOOSE, CASEY, CIKLIN, ET AL

Account Number : 076376001447 Phone (561)832-5900 : (561)833-4209 Fax Number

### LIMITED LIABILITY COMPANY

#### LUCANNA INVESTMENTS LLC

| 0        |
|----------|
| 0        |
| 702-3    |
| \$125.00 |
|          |

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| LUCANNA INVESTMENTS 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:   |  |
| 515 NORTH FLAGLER DRIVE  | SAME   |  |
| SUITE 1800   |  |  |
| WEST PALM BEACH, FL 33401  |  |  |
| The name and the Florida street address of the   | ered Office, & Registered Agent's Signature:<br>he registered agent are: |  |
| The name and the Florida street address of t   |  |  |
| The name and the Florida street address of t   | ne registered agent are:   |  |
| The name and the Florida street address of to RICHARD B. CRUM  No. 615 NORTH FLAGLER DE Florida street address                   | the registered agent are:  Inne  RIVE #1800  (P.O. Box NOT acceptable)   |  |
| The name and the Florida street address of the RICHARD B. CRUM  No. 615 NORTH FLAGLER DE Florida street address  WEST PALM BEACH | ne registered agent are:  une  RIVE #1800                                |  |

Page 1 of 2 (CONTINUED)

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| ARIICLE 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                |   |
|   |   |
| MGR                                     | RICHARD B CRUM                                    |
|   | 515 NORTH FLAGLER DR #1800                        |
|   | WEST PALM BEACH, FL 33401                         |
|   | ,   |
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| Use attachment if necessary)            |   |
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| NOTE: An additional article m           | ust be added if an effective date is requested.   |
|   |   |
| REQUIRED SIGNATURE:                     | 1/16/   |
|   |   |
|   | <i>∑</i> ∞ ≥ ∞                                    |
| Signature of a member of                | or an authorized representative of a member.      |
| (In accordance with section             | on 608.408(3), Florida Statutes, the execution    |
| of this document constitu               | tes an affirmation under the penalties of perjury |
| that the facts stated hereit            | n arc true.)                                      |
| RICHARD B CRUM                          | $\mathbb{C}^{\sim}$                               |
|   | d or printed name of signee                       |
|   |   |
|   |   |

#### Filing Fees:

\$100.00 Filing Fee for Articles of Organization

- \$ 25.00 Designation of Registered Agent \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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