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TRANSMITTAL LETTER

TO: Registration S Division of Co				
SUBJECT: Retail No	et Lease MS, LLC			
 		d Liability Company)		
The enclosed Articles of	of Organization and fee(s) are s	ubmitted for filing.		
Please return all corresp	oondence concerning this matte	er to the following:		
Donald	L. Chasen			
	0	Name of Person)		
Retail Net Lease, L	LC			
11000111012000,1		Firm/Company)		
222 U.S. H	ighway One - Suite 208	1		
		(Address)	PALLE OS A	
Tequ	uesta, FL 33469	-	ME 25	94 M
	(City	/State and Zip Code)	7	5-21
For further information	concerning this matter, please	call:	OS AUG 29 PM 4: 54 STATE SECNE ASSEE: FLORIE	of Sections,
Donald L. Chasen		at (561) 676-9310		
(Name	e of Person)	(Area Code & Daytime To	elephone Number)	
Enclosed is a check f	or the following amount:			
3 \$125.00 Filing Fee	☐ \$130.00 Filing Fee & Certificate of Status	☐ \$155.00 Filing Fcc & Certified Copy (additional copy is enclosed)	☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Regis Divis	EET ADDRESS: tration Section ion of Corporations i. Gaines Street	MAILING A Registration S Division of Co P.O. Box 632	lection orporations	

Tallahassee, Florida 32314

409 E. Gaines Street Tallahassee, Florida 32399

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:	
Retail Net Lease MS, LLC	- · · · · · · · · · · · · · · · · · · ·
ARTICLE II - Address: The mailing address and street address of the printing address and street address of the printing address.	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
222 U.S. Highway One	222 U.S. Highway One
Suite 208	Suite 208
Tequesta, FL 33469	Tequesta, FL 33469
ARTICLE III - Registered Agent, Registered of the name and the Florida street address of the region Donald L. Chasen	
rvame	⊕
222 U.S. Highway One - Suite 2	208
Florida street addre	ess (P.O. Box <u>NOT</u> acceptable)
Tequesta City, State, an	FL 33469 d 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, F.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: "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
MGRM	D&D Development, LLC 286 Beauvoir Road - Suite 200 Biloxi, MS 39531			
MGRM	EZON, Inc. 1100 Fifth Avenue South - Suite 210 Naples, FL 34102			
(Use attachment if necessary)	05 I			
NOTE: An additional article must be added if an effective date is requested.				
REQUIRED SIGNATURE: Longld L. Signature of a member or	29 P			
	608.408(3), Florida Statutes, the execution s an affirmation under the penalties of perjury n 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)

Donald L. Chasen