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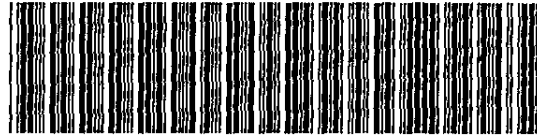
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

TRANSMITTAL LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Quinvest Management, LLC
(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Sandra Blake
(Name of Person)

Quinvest Group, LLC
(Firm/Company)

1400 NW 9th Avenue, Suite 19
(Address)

Boca Raton, FL 33486
(City/State and Zip Code)

For further information concerning this matter, please call:

James Patton at (561) 254-2834
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- ☒ \$125.00 Filing Fee ☐ \$130.00 Filing Fee & Certificate of Status ☐ \$155.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

STREET ADDRESS:
Registration Section
Division of Corporations
409 E. Gaines Street
Tallahassee, Florida 32399

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Quinvest Management, LLC

ARTICLE II - Address:

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

Principal Office Address:

1400 NW 9th Avenue, Suite 19
Boca Raton, FL 33486

Mailing Address:

1400 NW 9th Avenue, Suite 19
Boca Raton, FL 33486

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

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

Sandra Blake

Name

1400 NW 9th Avenue, Suite 19

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

Boca Raton, FL 33486

FL

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, F.S.

Sandra Blake

Registered Agent's Signature

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CLERK OF STATE
TALLAHASSEE, FLORIDA

(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

MGR

Sandra Blake, 1400 NW 9th Avenue, Suite 19
Boca Raton, FL 33486

MGR

Richard F. Neyman, Jr., 12434 Quercus Lane
Wellington, FL 33414

Managing Member

James W. Patton, 2410 Metrocentre Blvd.
West Palm Beach, FL 33407

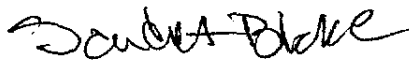
SEE ATTACHMENT

SEE ATTACHMENT

(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.)

Sandra Blake

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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TALLAHASSEE, FLORIDA

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ARTICLE IV – Manager(s) or Managing Member(s) CONTINUED:

Title: _____ Name and Address:

Managing Member Mark Coleman, 216 Chase Street
Sonoma, CA 95476

Managing Member Ian Sadler, 19815 Dinner Key Drive
Boca Raton, FL 33498

Managing Member Joshua Miller, 10363 186th Ct. South
Boca Raton, FL 33498

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TALLAHASSEE, FLORIDA