

Division of Corporations

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Florida Department of State
Division of Corporations
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RECEIVED
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DIVISION OF CORPORATION

FLORIDA/FOREIGN LIMITED LIABILITY CO.

TROPICAL ACRES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

SECRET
TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

TROPICAL ACRES, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

9165 PARK DRIVE

STE: 8

MIAMI SHORES, FL 33138

Mailing Address:

9165 PARK DRIVE

STE: 8

MIAMI SHORES, FL 33138

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

ESTIME-THOMPSON, P.A.

Name

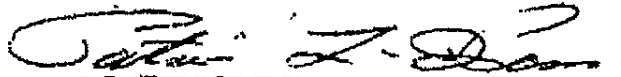
9165 PARK DRIVE STE: 8

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

MIAMI SHORES FL 33138

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..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

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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

FIRST LOAN SOLUTIONS, INC.

9165 PARK DRIVE STE: 8

MIAMI SHORES, FL 33138

MGRM

ROSE MARCELIN

9165 PARK DRIVE STE: 8

MIAMI SHORES, FL 33138

MGRM

SHERLEY THOMAS

9165 PARK DRIVE STE: 8

MIAMI SHORES, FL 33138

MGRM

PERETTE DORLUS

9165 PARK DRIVE STE: 8

MIAMI SHORES, FL 33138

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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.)

ERIC OBDEUS

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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MGRM

ANABELLE DORLUS
9165 PARK DRIVE STE: 8
MIAMI SHORES, FL 33138

MGRM

ELISANNE ALEXIS
9165 PARK DRIVE STE: 8
MIAMI SHORES, FL 33138

MGRM

ROSELENE ALEXANDRE
9165 PARK DRIVE STE: 8
MIAMI SHORES, FL 33138

MGRM

ERIC OBDEUS
9165 PARK DRIVE STE: 8
MIAMI SHORES, FL 33138

MGRM

MARIE OBDEUS
9165 PARK DRIVE STE: 8
MIAMI SHORES, FL 33138

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