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SECRETARY OF STATE
TALLAHASSEE, FI ORIN

COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT: JT	RR64 Partnes	LLC		
	(Name of Limite	ed Liability Company)		
The enclosed Articles of	Organization and fee(s) are s	submitted for filing.		
Please return all correspondent	ondence concerning this matt	er to the following:		
DAVI	o Winterroud	(Name of Person)		
	,	(Name of Person)		
W Bros	Commercial Deve	(Firm/Company)		_
<u>a653 S</u>	thekney Point Ro	nd ·		_
	,	(Address)		
SALASOM				_
	(City	y/State and Zip Code)		
For further information of	concerning this matter, please	call:		
DAVIO R. WIN	nterrowd of Person)	at (<u>941</u>) <u>931-39</u> (Area Code & Daytime Tele	89 ITAS SECRET OF SEPHONE Number)	
Enclosed is a check for	r the following amount:		_ II / ASSEE	Same and the same
□ \$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy) is enclosed)	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center C		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:
TTRR64 Partners, 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: Mailing Address:
2653 Stickney Point Road Strange FL 34231 Strange FL 34231 Strange FL 34231
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:
Davio Winterrowd
Florida street address (P.O. Box NOT acceptable) SAFANOM FL 34331 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)
Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Mem	Name and Address:
MGR	W Bros Commercial Development Corp 2653 Stickney Point Road Sacasom, FL 34231
MGR	Real Estate Synergics Corp. 812 Willowwood Une Naples, Fl 34108
	
(Use attachment if necessary	<i>y</i>)
ICLE V: Effective date, if other a effective date is listed, the dat	r than the date of filing: (OPTIONAL te must be specific and cannot be more than five business days
ICLE V: Effective date, if other	r than the date of filing: (OPTIONAL te must be specific and cannot be more than five business days

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)