Florida Department of State Division of Corporations Public Access System

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: BARNETT, BOLT, KIRKWOOD, LONG & MCBRIDE Account Name

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.ORIDA/FOREIGN LIMITED LI

GLEASON TOO, LLC

| Certificate of Status | 1 |
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| Certified Copy | 0 |
| Page Count | 02 |
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: The name of the Limited Liability Company is: | | |
|---|-----------------------------------|-------------------|
| GLEASON TOO, 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 Con | a pany is | : |
| Principal Office Address: Mailing Address: | ,, | فنسب |
| 1113 SE 47TH TERRACE | | |
| SUITE 1 CAPE CORAL, FL 33904 | | : |
| 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: Craig E. Behrenfeld Name 601 Bayshore Blvd., Suite 700 | SECRETARY OF STAT | 07 FEB -2 AM 9: 2 |
| Florida street address (P.O. Box NOT acceptable) | ₽m | 2 |
| Tampa FL 33606 | | |
| City, State, and Zip Having been named as registered agent and to accept service of process for the above state liability company at the place designated in this certificate, I hereby accept the appointm registered agent and agree to act in this capacity. I further agree to comply with the provisi statutes relating to the proper and complete performance of my duties, and I am familiar waccept the obligations of my position as registered agent as provided for in Chapter 608, | ient as ions of ai vith and | |

(CONTINUED) Page 1 of 2 H07000030562 3

| ARTICLE IV- Manager(s) or Managing Member(| 5): |
|--|-----|
|--|-----|

The name and address of each Manager or Managing Member is as follows:

| "MGR" = Manager | | |
|---------------------------------|---|-----------------------|
| "MGRM" = Managing Member | | |
| MGR | Michael J. Devito | |
| | 534 SE 16th Place | |
| | Cape Coral, Florida 33990 | |
| MGR | James A. Devito, Jr. | |
| | 1113 SE 47th Terrace, Suite 1 | |
| | Cape Coral, Florida 33904 | <u> </u> |
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| days after the date of filing.) | oe specific and cannot be more than five busi | ness days |
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| | /// | |
| 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.)

Craig E. Behrenfeld, Authorized Representative

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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