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Division of Corporations
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA**FLORIDA/FOREIGN LIMITED LIABILITY CO.****A Tropical Touch, LLC**

Certificate of Status	1
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3/27/2007

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **A Tropical Touch, LLC**

ARTICLE II - Address

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

12743 Brewster Drive
Fort Myers, FL 33908

ARTICLE III - Registered Agent, Registered Office & Registered Agents Signature

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

Charles Abels Massie

Name

15671 San Carlos Blvd., Suite 201
(P.O. Box or Mail Drop Box **NOT** acceptable)

Fort Myers, FL 33908
(City/State/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.

Charles Abels Massie

Registered Agent's Signature - Charles Abels Massie

ARTICLE IV - Management (Check box if applicable)

☐ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company

Pamela A. Denson

Signature of a member or 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.)

Pamela A. Denson

Typed or printed name of signee

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