

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 : (305)634-3694 Phone

Fax Number

(305) 633-9696

ORIDA/FOREIGN LIMITED LIABILITY CO.

ms gator properties, llc

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY OF

MS GATOR PROPERTIES, LLC

ARTICLE I

The name of the Limited Liability Company shall be: MS GATOR PROPERTIES, LLC

ARTICLE II

The Company is organized for any legal and lawful purpose for which a limited liability company may be organized pursuant to the Act.

ARTICLE III

The mailing address and street address of the principal office of the Limited Liability Company: 10013 W. OKEECHOBEE RD. #202, HIALEAH GARDENS, FL 33016

ARTICLE IV

The name and the Florida street address of the registered agent: MICHELLE SIMON 10013 W. OKEECHOBEE RD. #202, HIALEAH GARDENS, FL 33016

ARTICLE V

The name of the Managing Member(s) shall be:

MANAGING MEMBER and MEMBER
MICHELLE SIMON
10013 W. OKEECHOBEE RD. #202, HIALEAH GARDENS, FL 33016

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CERTIFICATE OF DESIGNATION REGISTERED AGENT/REGISTERED OFFICE/MEMBER/REPRESENTATIVE

MS GATOR PROPERTIES, LLC

Having been named as registered agent and to accept service of process for the above stated Limited Liability Company at the place designated in the articles of organization, 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.

Registered Agent
MICHELLE SIMON

Michelle Simon

Michelle Simon

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.)

MICHELLE SIMON

Typed or printed name of signee

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