Division of Corporations Public Access System

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(((H090001178093)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: GUNSTER, YOAKLEY, ETAL. (WEST PALM BEACH) Account Name

Account Number : 076117000420 : (561)650-0728 Phone

Fax Number : (561)655-5677

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Squantum Point, LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
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COVER LETTER

TO:	Registration Section Division of Corporations
SUBJE	SCT: SQUANTUM POINT, LLC
	(Name of Limited Liability Company)
The end	closed Articles of Organization and fee(s) are submitted for filing.
Please i	return all correspondence concerning this matter to the following:
•	Grace Gutierrez, Esq.
	(Name of Person)
_	GUNSTER, YOAKLEY & STEWART, P.A.
•	(Fints/Company)
	777 South Flagler Drive, Suite 500 East
_	(Address)
1	West Palm Beach, FL 33401
-	(City/State and Zip Code)
For furi	her information concerning this matter, please call:
Mar	y E. Cramer-Scharlatt _{st} 561 650-0728
	(Name of Person) (Area Code & Daytime Telephone Number)
Enclose	ed is a check for the following amount:
]\$125 .0	Of Filing Fee S S130.00 Filing Fee & S160.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
	Malling 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 Circle Tallahassee, FL 32301

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SQUANTUM POINT, I	_L	C
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(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

222 US Highway One, Suite 216 222 US Highway One, Suite 218 Tequesta, FL 33469 Tequesta, FL 33469

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:

GY Corporate Services, Inc.

777 S. Flagler Dr., Suite 500 East
Florida street address (P.O. Box NOT acceptable)

West Palm Beach FL 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)

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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: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Jacqueline Kritikos 222 US Highway One, Suite 216 Tequesta, FL 33469 (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: n member or an authorized representative of a member. (In accordance with section 608.408(3), Florida Statutes, the execution

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

that the facts stated herein are true.)

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

of this document constitutes an affirmation under the penalties of perjury

Jacqueline Kritikos, Managing Member Typed or printed name of signee