

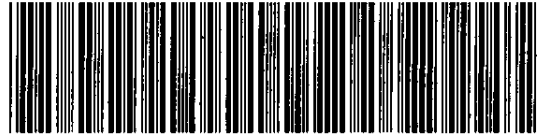
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(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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T. HAMPTON
OCT 28 2009
EXAMINER

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Castle Management, LLC

(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:

12270 SW 3rd Street
Suite 200
Plantation, Florida 33325

Mailing Address:

12270 SW 3rd Street
Suite 200
Plantation, Florida 33325

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 Vaughan

Name

12270 SW 3rd Street, Suite 200

Florida street address (P.O. Box NOT acceptable)

Plantation 33325 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)

(CONTINUED)

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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:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

Patrick J. Donnelly

12270 SW 3rd Street, Suite 200

Plantation, FL 33325

(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:


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.)

Patrick J. Donnelly

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)

AFFIDAVIT AND RELEASE

STATE OF FLORIDA)
 SS:
COUNTY OF BROWARD)

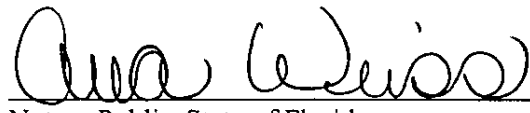
Before me personally appeared PATRICK J. DONNELLY ("Affiant"), who having taken an oath states the following:

1. Affiant is President of Castle Management, Inc., a Florida corporation.
2. Affiant is submitting to the Registration Section, Division of Corporation, Florida Secretary of State, Articles of Organization for Castle Management, LLC.
3. Affiant states that the ownership interests of Castle Management, Inc. and Castle Management, LLC are identical.
4. Affiant states that Castle Management, Inc. hereby releases the name "Castle Management" for use by Castle Management, LLC.

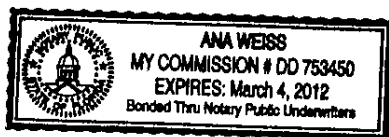
FURTHER AFFIANT SAYETH NOT.


PATRICK J. DONNELLY

Sworn to and subscribed before me this 23 day of October, 2009, by PATRICK J. DONNELLY, who (check one) ☒ is personally known to me or ☐ has produced a Florida drivers license as identification.


Notary Public, State of Florida
Print Name: Ana Weiss

My Commission Expires:
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