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**FLORIDA LIMITED LIABILITY CO.  
MAFRE ENTERPRISES, LLC**

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$160.00

**C. LEWIS**

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**EXAMINER**

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION OF  
MAFRE ENTERPRISES, LLC  
A LIMITED LIABILITY COMPANY**

The undersigned, being authorized to execute and file these Articles, hereby certifies that:

**ARTICLE I — Name & Address**

The name of the Limited Liability Company is: MAFRE ENTERPRISES, LLC

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

4261 3<sup>rd</sup> Avenue SW  
Naples, FL 34119

**ARTICLE II — Duration:**

The period of duration for the Limited Liability Company shall be perpetual.

**ARTICLE III — Purpose:**

The purpose for the Limited Liability Company shall be to operate a real property investment and development business and to engage in the transaction of any and all business activities permitted under the laws of Florida and the United States of America.

**ARTICLE IV — Management:**

The Limited Liability Company is to be managed by the members and the name and address of the managing member is:

Freddy H. Koenig  
4261 3<sup>rd</sup> Avenue SW  
Naples, FL 34119

Maria C. Koenig  
4261 3<sup>rd</sup> Avenue SW  
Naples, FL 34119

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**ARTICLE V — Admission of Additional Members:**

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be by consent of a majority of the members.

**ARTICLE VI — Members' Rights to Continue Business**

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be by consent of a majority of the members.

**ARTICLE VII — Effective Date**

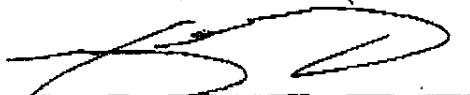
The term of this company shall be effective on January 1, 2011.


**ARTICLE VIII - Resident Agent**

The name of the initial registered agent and the Florida street address of the registered agent and office shall be:

Arlene F. Austin, Esq.  
6312 Trail Blvd.  
Naples, FL 34108

IN WITNESS WHEREOF, the undersigned has signed these Articles of Organization and acknowledged them to be their free act on this 15th day of December, 2010.

  
Freddy H. Koenig, Member/Mgr.

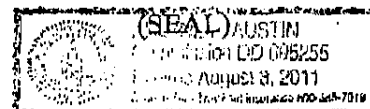
  
Maria C. Koenig, Member/Mgr.

State of Florida  
County of Collier

On December 15, 2010, Freddy H. Koenig and Maria C. Koenig, [ ] who are personally known to me or [XX] who each produced a Florida driver's license as identification and they personally appeared before me at the time of notarization, and acknowledged signing these Articles of Organization of MAFRE Enterprises, LLC, a Florida Limited Liability Company.

  
Notary Public: Arlene F. Austin

Commission Expiration Date & Commission Number:



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**CERTIFICATE OF DESIGNATION OF  
REGISTERED AGENT/REGISTERED OFFICE**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is: MAFRE ENTERPRISES, LLC
2. The name and the Florida street address of the registered agent and registered office are:

Arlene F. Austin, Esq.  
6312 Trail Blvd.  
Naples, FL 34108

*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.*

  
Arlene F. Austin, Esq.  
Registered Agent

State of Florida  
County of Collier

On December 15, 2010, Arlene F. Austin, designated above as the individual who shall serve as the company's initial registered agent, [XX] who is personally known to me, or [ ] produced a Florida driver's license as identification, personally appeared before me at the time of notarization, and acknowledged signing these Articles of Organization of MAFRE ENTERPRISES, LLC, as resident agent.

  
Notary Public

Jessica Fisher  
(Notary Public - Printed Or Typed Name)



JESSICA FISHER  
MY COMMISSION # DD 902209  
EXPIRES: July 4, 2013  
Bonded Three Hundred Ninety Dollars

Commission Expiration Date & Commission Number:  
Personally Known  
Identification

(SEAL)

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