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TALLAHASSEE, FLORIDA

COVER LETTER

	f Corporations			
SUBJECT: 5PC	oints Hospitality, LL	С		
	Name of Limit	ted Liability Con	npany	
The enclosed Article	es of Organization and fee(s) are	submitted for fil	ing.	
Please return all cor	respondence concerning this mat	ter to the followi	ing:	
<u>Diana l</u>	Pankova			
		Name of Person		-
Pankov	/a Law Group, PL			
		Firm/Company		
2519 M	1cMullen Booth Rd.			
		Address		
Clearwa	ter, FL 33761			
		y/State and Zip Co	ode	
pankova	@pankovalaw.com	0.0		
	E-mail address: (to be used		eport notification	1)
For further informat	ion concerning this matter, please	e call:		
Diana Pankov	a	_ _{at (} 727	, 512-037	71
Na	ime of Person		ode & Daytime T	Celephone Number
Enclosed is a chec	k for the following amount:			
5125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fi Certified C		\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registr Divisio Clifton 2661 E	Courier Address ation Section on of Corporation Building Executive Center assee, FL 3230	ons er Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Con	npany is:	
5Points Hospitality, LLC		
(Must end with the words "Lir	nited 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:	
1400 Main Street	P.O. Box 1974	
Sarasota, FL 34236	Venice, FL 34284	
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its business entity with an active Florida registration.)	own Registered Agent. You must designate an ind	
The name and the Florida street address	s of the registered agent are:	MAR 17 CRETARY LAHASSI
Pankova Law G	roup, PL	IL RI7 TAR ASS
	Name	<u> </u>
2519 McMuller	Booth Rd., Ste 510-309	AM IO

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..

City, State, and Zip

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

_{FL} 33761

Registered Agent's Signature (REQUIRED)

Clearwater,

(CONTINUED)

<u>Title:</u>	Name and Address:
"MGR" = Manager	
"MGRM" = Managing Membe	r
MGR	Nick Pankov
	3432 SR 580, #420
	Safety Harbor, FL 34695
(Use attachment if necessary)	
LE V: Effective date, if other the fective date is listed, the date in days after the date of filing.) REQUIRED SIGNATURE:	nan the date of filing: (OPTION nust be specific and cannot be more than five business d
LE V: Effective date, if other the fective date is listed, the date in days after the date of filing.) REQUIRED SIGNATURE:	nust be specific and cannot be more than five business d
LE V: Effective date, if other the fective date is listed, the date in days after the date of filing.) REQUIRED SIGNATURE: Signature of a	nust be specific and cannot be more than five business d
LE V: Effective date, if other the fective date is listed, the date in days after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance with sect constitutes an affirmation I am aware that any fals)	nust be specific and cannot be more than five business d
LE V: Effective date, if other the detective date is listed, the date in days after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance with sect constitutes an affirmatic I am aware that any fals	member or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true. e information submitted in a document to the Department of State e felony as provided for in s.817.155, F.S.)
LE V: Effective date, if other the fective date is listed, the date in days after the date of filing.) REQUIRED SIGNATURE: Signature of a (In accordance with sect constitutes an affirmatic I am aware that any fals constitutes a third degree	member or an authorized representative of a member. ion 608.408(3), Florida Statutes, the execution of this document on under the penalties of perjury that the facts stated herein are true. e information submitted in a document to the Department of State e felony as provided for in s.817.155, F.S.)

ARTICLE IV- Manager(s) or Managing Member(s):

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