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(Re	questor's Name)	
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(Cit	ty/State/Zip/Phone	; #)
PICK-UP	☐ WAIT	MAIL .
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Certified Copies	_ Certificates	s of Status
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SECRETARY OF STATE. ALLAHASSEE, FLORIDA

2012 HAR 22 AM 10: 11

J. SAULSBERRY EXAMINER

MAR 22 2012

COVER LETTER

Division of Corp					
SUBJECT: CORE	Real Properties, L	LC.	ı		
SUBJECT:	Name of Limited L				
The enclosed Articles of C	Organization and fee(s) are sub	mitted for filing.			
Please return all correspon	dence concerning this matter to	o the following:	•		
Todd Dura	ind				
		me of Person			•
<u> </u>	Fir	nn/Company			
4095 State	Road 7, Suite L-1				
		Address	· 7	~	
		•	Ē	OIZ SEC	
Wellington, F		171.0.1	<u>P</u>	RE S	~7
tdurand@core	e90.com	ate and Zip Code	VSSEE	2012 MAR 22 SECRETARY	- T
	E-mail address: (to be used for fi	uture annual report notification)) LLL.		
For further information co	ncerning this matter, please cal	11:	OR ID	AM 10: 12	9,23,2
Todd Durand	at	, 561 953-6260	>.	. 10	
Name of		Area Code & Daytime Tel	ephone Number		
Enclosed is a check for	the following amount:	•	·		
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & [Certified Copy (additional copy is enclosed)	\$160.00 Filing Certificate of S Certified Copy (additional copy i	Status &	
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporation Clifton Building 2661 Executive Center	os.		

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:					
CORE Real Properties, LLC (Must end with the words "Limited Liability	ly Company, "L.L.C.," or "LLC.")				
ARTICLE II - Address: The mailing address and street address of the pri	ncipal office of the Limited Liability Company is:				
Principal Office Address:	Mailing Address:				
8401 Lake Worth Road Suite 126 Lake Worth, FL 33467	4095 State Road 7 Suite L-118 Wellington, FL 33449				
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.)	red Agent. You must designate an individual or another				
The name and the Florida street address of the re	egistered agent are:				
CORE 90, LLC	SECRETARY ALLAHASSE				
Name	SE 25 L				
8401 Lake Worth Road #126					
Florida street address (P.O. Box NOT acceptable) Lake Worth 33467					
Lake Worth	FL 33467				
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)

Page 1 of 2

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

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:			
MGRM	CORE 90, LLC 4095 State Road 7, Suite L-118 Wellington, FL 33467			
MGR	James DeNitto	<u></u>	2	
	9072 Dupont Place		92	
	Wellington, FL 33414		2012 MAR 22	
	•	AS	-	J
MGR	Charles Faremouth	بد ري بد ري	8	
-	250 Las Palmas	mo`		!
	Royal Palm Beach, FL 33411	77.	E C	([
	4	TA PR	<u>\$</u>	7
		<u>5</u> -6		
	· ·	.,5>	~	
(Use attachment if necessary)				
ARTICLE V: Effective date, if other than the conference of the date must be to or 90 days after the date of filing.)	date of filing: specific and cannot be more than fiv	(OPTION e business da	AL) ıys pric)r
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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Todd Durand

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)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY.

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The name of the Limited Liability Company is:

CORE Real Properties, 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:		Mailing Address:		
8401 Lake Worth Road		4095 State Road 7	,`,	
Suite 126		Suite L-118		
Lake Worth CL 22467		Wellington, FL 33449		
ARTICLE III - (The Limited Liability business entity with The name and th	Registered Agent, Registered Agent, Registered Agent, Registration of the Plorida registration.) Todd Durand	stered Office, & Registered Agent's range Registered Agent. You must designate an individual of the registered agent are:		
		Name	ga ₹	A specialists
	8401 Lake W	orth Road #126	STAFE LORIDA	
	Florida st	reet address (P.O. Box NOT acceptable)	,	•
	Lake Worth	_{FL} 33467		
•	(City, State, and Zip		

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Registered Agent's Signature (REQUIRED)

(CONTINUED)