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| (Re | questor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
| (Bu | siness Entity Nar | me) |
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| Certified Copies | _ Certificates | s of Status |
| Special Instructions to | Filing Officer: | |
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T. HAMPTON

COVER LETTER

| 1 | COVE | RLEITER " | |
|-----------------------------------|--|---|--|
| TO: Registration S Division of Co | | | |
| SUBJECT: Sout | h Beach Heat | t LLC. | |
| | Name of Limit | ed Liability Company | |
| The enclosed Articles o | f Organization and fee(s) are s | submitted for filing. | |
| Please return all corresp | ondence concerning this matt | er to the following: | |
| Lewis C | Carran | | |
| | | Name of Person | |
| | | | |
| | | Firm/Company | |
| P.O Bo | x 10621 | | |
| | | Address | |
| Naples | , FI 34101 | | |
| <u> </u> | | y/State and Zip Code | |
| Carranian | dcompany@gmai | I.COM for future annual report notification) | , |
| For further information | concerning this matter, please | | |
| Lewis Carr | an | ,,732 \ 245-0 ₄ | 437 |
| Name | of Person | Area Code & Daytime Tele | |
| Enclosed is a check f | or 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 Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | Mailing Address Registration Section | Street/Courier Address Registration Section | |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: | |
|---|---|
| The name of the Limited Liability Company is | : |
| | |
| South Beach Heat "LLC." | Th. C |
| (Must end with the words "Limited Liab | inty Company, "E.E.C., or "EEC.") |
| ARTICLE II - Address: | |
| The mailing address and street address of the p | rincipal office of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 2640 12th Street North | P.O Box 10621 |
| Naples, FI 34103 | Naples, Fl 34101 |
| | |
| business entity with an active Florida registration.) The name and the Florida street address of the Lewis Carran | registered agent are: |
| Name | <u> </u> |
| | |
| 2640 12th Street North | dress (P.O. Box NOT acceptable) |
| Naples, FI 34103 | <u> </u> |
| | FL tate, and Zip |
| · | · |
| | accept service of process for the above stated limited this certificate, I hereby accept the appointment as |
| | city. I further agree to comply with the provisions of |
| all statutes relating to the proper and comple | te performance of my duties, and I am familiar with |
| and accept the obligations of my position as re | gistered agent as provided for in Chapter 608, F.S |
| June C | avar_ |
| Registered Agent's Signa | ture (REQUIRED) $\mathbf{\omega} \leq \mathbf{\omega}$ |
| | SECR COR |
| (CONTIN | SECRETAR VISION OF FL SUED) |
| | - SXE |
| Page 1 of | 2 - 국위 |

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 | Name and Address: | |
|--|--|--|
| "MGRM" = Managing Member | | |
| El Presidente, "Mgr." | Deborah Parr | |
| | 3509 Mabillion Way | |
| | Wellington, FI 33449 | |
| Indentured Servant, "MGRM" | Lewis Carran | |
| | 2640 12th Street North | |
| | Naples, Fl 34103 | |
| | | |
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| LE V: Effective date, if other the | must be specific and cannot be more that | (OPTIONA an five busine |
| (Use attachment if necessary) LE V: Effective date, if other the ffective date is listed, the date or 90 days after the date of filities. REQUIRED SIGNATURE: | must be specific and cannot be more that | (OPTIONA an five busine |
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