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(Re	questor's Name)				
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J. SAULSBERRY EXAMINER JUL 19 2013

COVER LETTER

TO:	Registration S Division of Co		&	
SUBJ	ECT: Bea	gle's Eagle, Ll	_C	
2020		Name of Limit	ed Liability Company	
The er	nclosed Articles o	f Organization and fee(s) are s	submitted for filing.	
Please	return all corresp	ondence concerning this matt	er to the following:	
	Gregg:	S. Levy, Esq.		
			Name of Person	
	McCart	hy, Lebit, Cry	stal & Liffman C	o., L.P.A.
	•		Firm/Company	
	101 W.	Prospect Ave	enue, Suite 1800) 7013
			Address	1, 7
	Cleveland, Ohio 44115			
	City/State and Zip Code			-5 3
	gsi@mcca	arthylebit.com E-mail address: (to be used f	or future annual report notification)	
For fu	rther information	concerning this matter, please	•	ے ہوہا ⊆
Gr		Levy, Esq.	at (216) 696-14	
Enclo	sed 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	Street/Courier Address	

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

The name of the Limited Liability Company i	is:
Beagle's Eagle, LLC	
(Must end with the words "Limited Lia	ability 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:
6605 South Dixie Highway, Suite 200	6605 South Dixie Highway, Suite 200
West Palm Beach, FL 33405	West Paim Beach, FL 33405
Donna M. Sotillo Nam 6605 South Dixie Highway, Suite Florida street a West Palm Beach	address (P.O. Box NOT acceptable)
	FL 33405 State, and Zip
Having been named as registered agent and to liability company at the place designated in registered agent and agree to act in this capa all statutes relating to the proper and compl	o accept service of process for the above stated limited in this certificate, I hereby accept the appointment as acity. I further agree to comply with the provisions of lete performance of my duties, and I am familiar with registered agent as provided for in Chapter 608, F.S.

(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:		
	MGR	Gregg S. Levy		
		6 Foxwood Lane		
		Pepper Pike, OH 44124		
	MGR	Donna M. Sotillo		
		6605 South Dixie Highway, Suite 200	7 0	
		West Palm Beach, FL 33405	2013 JUL 16 RITE LAIE	
			<u> </u>	:
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	21			
	(Use attachment if necessary)			
ric	LE V: Effective date, if other than the da	ate of filing	(OPTIONAL)	
	effective date is listed, the date must b			
	o or 90 days after the date of filing.)	e specific and cannot be more than	Tive outsiness	uny
<i>)</i> 1 ((of you days after the date of fining.)			
	REQUIRED SIGNATURE:	/		
	11			
		.,//\ ' //		
	//			
	Signature of a member o	r an authorized representative of a membe	r.	
	(In accordance with section 608.40	08(3), Florida Statutes, the execution of this do	ocument	
	constitutes an affirmation under the	e penalties of perjury that the facts stated here	in are true.	
	I am aware that any false informati constitutes a third degree felony as	ion submitted in a document to the Department provided for in \$ 817.155. F.S.)	of State	
	-	•		
	Gregg S. Levy, Esq., Author	orized Representative		

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)

Typed or printed name of signee