

L13000110047

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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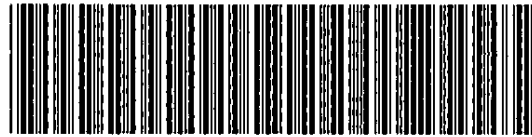
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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Office Use Only



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08/05/13--01001--018 **160.00

RECEIVED
13 AUG -2 PM 4:38
DIVISION OF CORPORATIONS

FILED
13 AUG -2 PM 12:00
TALLAHASSEE, FLORIDA
SECRETARY OF STATE

05 2013
BUTLER

CORPDIRECT AGENTS, INC. (formerly CCRS)
515 EAST PARK AVENUE
TALLAHASSEE, FL 32301
222-1173

FILING COVER SHEET
ACCT. #FCA-23

CONTACT: KATIE WONSCH

DATE: 08/02/2013

REF. #: 7747668.8852695

CORP. NAME: IPCP FUND 5, LLC

FILED
13 AUG -2 PM 12:00
TALLAHASSEE, FLORIDA
DEPT. OF STATE

- | | | |
|--|---|---|
| <input type="checkbox"/> ARTICLES OF INCORPORATION | <input type="checkbox"/> ARTICLES OF AMENDMENT | <input type="checkbox"/> ARTICLES OF DISSOLUTION |
| <input type="checkbox"/> ANNUAL REPORT | <input type="checkbox"/> TRADEMARK/SERVICE MARK | <input type="checkbox"/> FICTITIOUS NAME |
| <input type="checkbox"/> FOREIGN QUALIFICATION | <input type="checkbox"/> LIMITED PARTNERSHIP | <input checked="" type="checkbox"/> LIMITED LIABILITY |
| <input type="checkbox"/> REINSTATEMENT | <input type="checkbox"/> MERGER | <input type="checkbox"/> WITHDRAWAL |
| <input type="checkbox"/> CERTIFICATE OF CANCELLATION | | |
| <input type="checkbox"/> OTHER: | | |

STATE FEES PREPAID WITH CHECK# 70005600 FOR \$ 160.00

AUTHORIZATION FOR ACCOUNT IF TO BE DEBITED:

_____ COST LIMIT: \$ _____

PLEASE RETURN:

- | | | |
|--|--|---|
| <input checked="" type="checkbox"/> CERTIFIED COPY | <input checked="" type="checkbox"/> CERTIFICATE OF GOOD STANDING | <input type="checkbox"/> PLAIN STAMPED COPY |
| <input type="checkbox"/> CERTIFICATE OF STATUS | | |

Examiner's Initials

AUG 05 2013
BUTLER

**ARTICLES OF ORGANIZATION
OF
IPCP FUND 5, LLC
a Florida limited liability company**

1. The name of the limited liability company is:

IPCP FUND 5, LLC.

2. The mailing and street address of the principal office of the limited liability company is:

225 NE Mizner Boulevard
Suite 400
Boca Raton, FL 33432.

3. The name and street address of the initial registered agent of the limited liability company are:

IP Capital Partners, LLC
225 NE Mizner Boulevard
Suite 400
Boca Raton, FL 33432.

4. The name and street address of the Managing Member is:

IPCP GP I, LLC
225 NE Mizner Boulevard
Suite 400
Boca Raton, FL 33432.

Dated: as of August 2, 2013.



Jason Isaacson
Authorized Representative

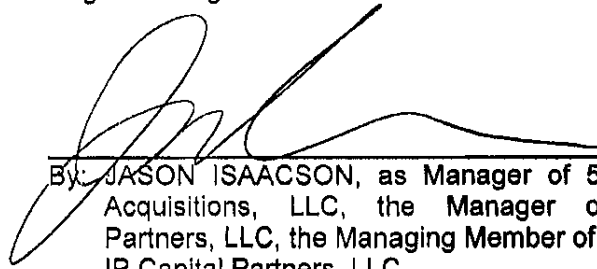
FILED
18 AUG -2 PM 12:00
CLERK OF CIRCUIT COURT
IN AND FOR THE COUNTY OF PALM BEACH, FLORIDA

**ACCEPTANCE OF APPOINTMENT
AS REGISTERED AGENT**

The undersigned, who has been designated in the foregoing Articles of Organization as registered agent for the limited liability company therein named, hereby agrees that (i) it accepts such appointment as registered agent and will accept service of process for and on behalf of said limited liability company, and (ii) it is familiar with and will comply with any and all laws relating to the complete and proper performance of the duties and obligations of a registered agent of a Florida limited liability company.

Dated: as of August 2, 2013.

IP Capital Partners, LLC
Registered Agent


By: JASON ISAACSON, as Manager of 5 Eyes
Acquisitions, LLC, the Manager of JIP
Partners, LLC, the Managing Member of
IP Capital Partners, LLC