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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : CORPORATE CREATIONS INTERNATIONAL INC.
Account Number : 110432003053
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO. H4 Pinecrest Investments, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

NOV 13 2013

**ARTICLES OF ORGANIZATION OF
H4 PINECREST INVESTMENTS, LLC**

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Florida Statutes Chapter 608, as amended, hereby makes, acknowledges and files the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company is H4 Pinecrest Investments, LLC (the "Company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Company is 6550 SW 128th Street Pinecrest FL 33156.

ARTICLE III - DURATION

The period of duration for the Company shall be perpetual.

ARTICLE IV - REGISTERED OFFICE AND AGENT AND ADDRESS

The name and street address of the registered agent and the registered office of the Company in the State of Florida are:

<u>Name</u>	<u>Address</u>
Gregory Hernandez	200 Biscayne Blvd Way, Apt 3901 Miami, FL 33131

ARTICLE V - MANAGEMENT


The management of the Company shall be vested in the manager. The name and address of the initial managers are as follows:

<u>Title:</u>	<u>Name and Address:</u>
MGR	H4.2, LLC

[Signature page follows]

FILED
2018 NOV 12 PM 1:04
CLERK OF STATE
TALLAHASSEE, FLORIDA


IN WITNESS WHEREOF, the undersigned has made and subscribed these Articles of Organization for the foregoing uses and purposes this 12 day of November 2013.

By: 
Name: Gregory Hernandez
Title: Authorized Person

REGISTERED AGENTS ACCEPTANCE

Having been named as registered agent and to accept service of process for H4 Pinecrest Investments, LLC at the place designated in this certificate, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his duties, and is familiar with and accepts the obligations of his position as registered agent as provided for in Chapter 608, Florida Statutes.

Dated: November 12, 2013

By: 
Name: Gregory Hernandez
Title: Registered Agent

2013 NOV 12 PM 1:04
CLERK OF DISTRICT COURT
TALLAHASSEE FLORIDA

FILED

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IN WITNESS WHEREOF, the undersigned, has hereunto subscribed her name and affixed her seal this 12th day of NOV, 2013.

Witnesses:

[Signature]
Print Name: Anne Cameron

Ashley P. Olson
ASHLEY P. OLSON, Managing Member

[Signature]
Print Name: Raemona J. Carter

STATE OF FLORIDA:
COUNTY OF CHARLOTTE:

I HEREBY CERTIFY that on this day, before me, a Notary Public duly authorized in the State and County named above to take acknowledgment, personally appeared ASHLEY P. OLSON to me known to be the person described as incorporator or who has produced FL D/L as identification, and who executed the foregoing Articles of Organization, and he acknowledged that he executed the same for the purposes therein stated and did not take an oath.

WITNESS my hand and official seal in the State and County aforesaid this 12th day of November, 2013.

[Signature]

Printed Name: _____

Notary Public
State of Florida

Commission Number: _____

Commission Expiration Date _____



RAEMONA J. CARTER
MY COMMISSION # EE 150869
EXPIRES: February 8, 2016
Booth-Town Budget Notary Services

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA:

1. The name of the limited liability company is ASHLEY P. OLSON, LLC.
2. The name and address of the registered agent and office is:

ASHLEY P. OLSON, 4279 Harbor Blvd, Port Charlotte, FL 33952

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.

Ashley P Olson
ASHLEY P. OLSON

Dated: 11/12/13CLERK OF STATE
TALLAHASSEE, FLORIDA

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