

**L1400031832**

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To: Division of Corporations  
Fax Number : (850) 617-6393

From: Account Name : JOSEPH M. BALOCCO, P.A.  
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**FLORIDA LIMITED LIABILITY CO.  
LEVITATION PROPERTIES, LLC**

Certificate of Status	1
Certified Copy	1
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February 21, 2014

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

JOSEPH M. BALOCCO, P.A.

SUBJECT: LEVITATION PROPERTIES, LLC  
REF: W14000011458

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Florida law requires the street address of the principal office and, if different the mailing address of the entity. A post office box is not acceptable for the principal office.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce  
Regulatory Specialist II

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**ARTICLES OF ORGANIZATION  
OF  
LEVITATION PROPERTIES, LLC**

**ARTICLE I - NAME:**

The name of the Limited Liability Company is: Levitation Properties, LLC a Florida Limited Liability Company

**ARTICLE II - ADDRESS:**

The mailing address and the street address of the principal office of the Limited Liability Company is: 888 SE 3<sup>rd</sup> Avenue, Suite 50, Fort Lauderdale, FL 33316

**ARTICLE III - DURATION:**

The period of duration for the Limited Liability Company shall be perpetual.

**ARTICLE IV - MANAGEMENT:**

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

Name

Miles A. Forman, II

Address

PO BOX 292037  
Davie, FL 33329

**ARTICLE V - ADMISSION OF ADDITIONAL MEMBERS:**

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be conditioned upon the unanimous consent of the members.


**ARTICLE VI - MEMBERS' RIGHTS TO CONTINUE BUSINESS**

The right, if given, of the remaining members of the Limited Liability Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be conditioned upon the unanimous consent of the remaining members.

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H1400047693

IN WITNESS WHEREOF, I have signed these Articles of Organization and acknowledged them to be my act this 18th day of February, 2008.

  
Signature of a member of an authorized  
representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Miss A. Fornan, II  
Typed or printed name of signee


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

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: **Lewiston Properties, LLC a Florida Limited Liability Company**
2. The name and the Florida street address of the registered agent are:

<b>Name</b>	<b>Address</b>
<b>Miss A. Fornan, II</b>	<b>888 SE 3<sup>rd</sup> Avenue, Suite 501</b>
	<b>Fort Lauderdale, FL 33316</b>

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 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.

  
Miss A. Fornan, II

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