

**L14000105999**

## Florida Department of State

Division of Corporations  
Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H14000154697 3)))



H140001546973ABC4

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

## To:

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

## From:

Account Name : WHITE & CASE  
Account Number : 075410002143  
Phone : (305) 371-2700  
Fax Number : (305) 358-5744FILED  
14 JUL -2 PM 1:15  
TALLAHASSEE, FLORIDA

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**FLORIDA LIMITED LIABILITY CO.****CF One Bonterra, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

1548031, -0002

July 2, 2014

WHITE & CASE

SUBJECT: CF ONE BONTERRA, LLC  
REF: W14000040240

RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
2014 JUL -2 AM 10:52  
NO ACKNOWLEDGE  
SUFFICIENCY OF FILING

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.

The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

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

~~Gretchen Harvey~~ *Tim Burch*  
Regulatory Specialist II Supervisor

FAX Aud. #: H14000154697  
Letter Number: 514A00014096

**ARTICLES OF ORGANIZATION**

**OF**

**CF ONE BONTERRA, LLC**

Pursuant to Section 605.0201 of the Florida Statutes, the undersigned hereby files these Articles of Organization as follows:

**ARTICLE I - NAME**

The name of the Limited Liability Company is CF ONE BONTERRA, LLC.

**ARTICLE II - ADDRESS**

The mailing address and street address of the principal office of the Limited Liability Company is 135 San Lorenzo Avenue, Suite 740, Coral Gables, FL 33146.

**ARTICLE III - INITIAL REGISTERED AGENT**

The street address of the initial Registered Office of this Company in the State of Florida shall be 135 San Lorenzo Avenue, Suite 750, Coral Gables, FL 33146. The name of the initial Registered Agent of this Company at the above address shall be K. Lawrence Gragg.

**ARTICLE IV - MANAGEMENT**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

Authorized Member

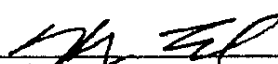
**Name and Address:**

CF One Holdings, LLC  
135 San Lorenzo Avenue, Suite 740  
Coral Gables, FL 33146

**ARTICLE V - DURATION**

The period of duration for the Limited Liability Company is perpetual.

IN WITNESS WHEREOF, the undersigned authorized representative has hereunto set his hand and seal this 26<sup>th</sup> day of June, 2014.

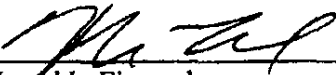
  
\_\_\_\_\_  
Name: Harold L. Eisenacher  
Title: Authorized Agent

FILED  
14 JUL -2 PM 4:15  
TALLAHASSEE, FLORIDA

**CERTIFICATE DESIGNATING REGISTERED AGENT  
AND REGISTERED OFFICE**

Pursuant to the provisions of Section 605.0113, Florida Statutes, the undersigned submits the following statement in designating the registered office/registered agent:

CF One Bonterra, LLC, desiring to organize as a limited liability company under the laws of the State of Florida has designated c/o 135 San Lorenzo Avenue, Suite 750, Coral Gables, FL 33146 as registered office and named K. Lawrence Gragg as the initial registered agent.

By:   
Harold L. Eisenacher  
Authorized Agent

Having been named Registered Agent for the above stated limited liability company, at the designated Registered Office, the undersigned hereby accepts said appointment 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 the undersigned's duties, and the undersigned is familiar with and accepts the obligations of the undersigned's position as registered agent as provided for in Section 605.0113, Florida Statutes.

By:   
K. Lawrence Gragg  
Registered Agent

RECEIVED  
OFFICE OF THE  
CLERK OF THE  
COURT  
TALLAHASSEE, FLORIDA

14 JUL -2 PM 4:45

FILED