

8/11/2014 Aug. 11.

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Division of Corporations

No. 9459 P. 1

L140001888403

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

From:

Account Name : MOMBACH, BOYLE & HARDIN, P.A.
Account Number : 074143000064
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Email Address: KM@CBKFS.com

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DIVISION OF CORPORATIONS
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**FLORIDA LIMITED LIABILITY CO.
CBK SUNNY ISLES, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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D. BRUCE

Aug. 11. 2014 1:18PM

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H14000188840 3

**ARTICLES OF ORGANIZATION
OF
CBK SUNNY ISLES, LLC**

The undersigned, as the authorized representative of the initial member(s) of **CBK SUNNY ISLES, LLC**, a Florida limited liability company formed hereunder (the "Company"), on behalf of the member(s) of the Company, hereby forms a limited liability company under the laws of the State of Florida.

**ARTICLE I
COMPANY NAME**

The name of the Company is **CBK SUNNY ISLES, LLC**.

**ARTICLE II
MANAGEMENT**

The Company will be a manager managed company. The initial Manager is CBK Financial Solutions, LLC.

**ARTICLE III
MAILING ADDRESS AND STREET ADDRESS OF COMPANY**

The mailing address, the street address and e-mail address of the principal office of the Company is:

1125 Clare Avenue, Suite 8
West Palm Beach, FL 33401
e-mail: KM@CBKFS.com

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ARTICLE IV
REGISTERED AGENT AND REGISTERED AGENT ADDRESS

The registered agent and the street address of the registered agent of this Company in the State of Florida shall be:

Conrad J. Boyle
Mombach, Boyle, Hardin & Simmons, P.A.
500 East Broward Boulevard
Suite 1950
Fort Lauderdale, Florida 33394

IN WITNESS WHEREOF, the undersigned being the authorized representative of the initial member(s) of the limited liability company hereby executes these Articles of Organization, this 11 day of August, 2014.



CONRAD J. BOYLE

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

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TALLAHASSEE, FLORIDA

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No. 9459 P. 4
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STATE OF FLORIDA
COUNTY OF BROWARD

The foregoing instrument was acknowledged before me this 11 day of August, 2014, by
CONRAD J. BOYLE, who ☒ is personally known to me or who ☐ has produced a Florida
driver's license as identification.



Cecilia Dunlavy
Notary Public - State of Florida
My Commission Expires:
Commission Number:

Having been named as registered agent and to accept service of process for the above 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 as provided for in Chapter 605, F.S.

DATED this 11 day of August, 2014.

Conrad J. Boyle
CONRAD J. BOYLE

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NOTARY PUBLIC
STATE OF FLORIDA

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