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From: Account Name : SCOTT M. GRANT, P.A.  
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**FLORIDA LIMITED LIABILITY CO.  
GIOVANNI MANAGEMENT, LLC**

Certificate of Status	1
Certified Copy	0
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AUG 19 2014  
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August 18, 2014

FLORIDA DEPARTMENT OF STATE  
Division of Corporations

SCOTT M. GRANT, P.A.

SUBJECT: GIOVANNI MANAGEMENT, LLC  
REF: W14000050280

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 coversheet.

Effective January 1, 2014, all limited liability company forms must be submitted in accordance with the Revised Limited Liability Company Act, Chapter 605, Florida Statutes.

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.

Tammi Cline  
Regulatory Specialist II

FAX Aud. #: H14000192887  
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ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I  
NAME

The name of the Limited Liability Company is:

GIOVANNI MANAGEMENT, LLC

ARTICLE II  
ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

8460 Abbingtion Circle, #1822  
Naples, FL 34108

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TALLAHASSEE, FLORIDA

ARTICLE III  
DURATION

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

ARTICLE IV  
MANAGEMENT

The Limited Liability Company is to be managed by Managing Members and the name and address of such Managing Members are:

Angelo John Mariani  
8460 Abbingtion Circle, #1822  
Naples, FL 34108

ARTICLE V  
ADMISSION OF ADDITIONAL MEMBERS

Upon unanimous approval by the Members, the Company is authorized to issue additional Units in the Company and to admit Additional Members to the Company.

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

The remaining members of the company shall have the right 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.

**ARTICLE VII**  
**REGISTERED AGENT**

The name and address of the registered agent is:

Scott M. Grant, Esq.  
GRANTLAW, P.A.  
3400 Tamiami Trail N., Suite 201  
Naples, FL 34103

25th AUG 18 PM 09:16  
SECRETARY OF  
TALLAHASSEE

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 as provided for in Chapter 608, Florida Statutes.

REGISTERED AGENT:

  
\_\_\_\_\_  
Scott M. Grant

These Articles are executed this 15<sup>th</sup> day of August, 2014 by the undersigned sole Member of GIOVANNI MANAGEMENT, LLC, pursuant to Section \*605.0102(B)(a) of the Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

MANAGING MEMBER:

  
\_\_\_\_\_  
ANGELO JOHN MARIANI