

**L1400013773**

Florida Department of State  
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DIVISION OF CORPORATIONS  
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**FLORIDA LIMITED LIABILITY CO.  
WOLVERINE MANAGEMENT, LLC**

Certificate of Status	0
Certified Copy	1
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STATE OF FLORIDA  
TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION  
OF  
Wolverine Management, LLC**

**ARTICLE I - NAME**

The name of the limited liability company shall be Wolverine Management, LLC (the "Company").

**ARTICLE II - STREET AND MAILING ADDRESS**

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

12800 University Drive  
Suite 275  
Fort Myers, FL 33907

**ARTICLE III - EFFECTIVE DATE**

This limited liability company's existence shall commence upon the filing of these Articles of Organization and shall terminate as provided for in the Operating Agreement.

**ARTICLE IV - INITIAL REGISTERED AGENT AND OFFICE**

The name and street address of the initial registered agent of the Company is:

<u>Name</u>	<u>Address</u>
Mathew Baum	12800 University Drive, Suite 275 Fort Myers, FL 33907

**ARTICLE V - PURPOSE**

The Company shall have unlimited power to engage in and do any lawful act concerning any or all lawful businesses for which limited liability companies may be organized according to the laws of the State of Florida, including all powers and purposes now and hereafter permitted by law to a limited liability company.

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**ARTICLE VI - MANAGEMENT OF THE COMPANY**

The Company shall be managed by not less than one (1) manager (the "Manager") and is, therefore, a manager-managed company.

**ARTICLE VII - OPERATING AGREEMENT**

The Members shall have the power to adopt, alter, amend, or repeal the Operating Agreement of the Company containing provisions for the regulation and management of the affairs of the Company.

The undersigned, being an authorized representative of the Members of the Company, has executed these Articles of Organization this 2<sup>nd</sup> day of September, 2014.



MATHEW BAUM  
Authorized Representative

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

PURSUANT TO THE PROVISIONS OF SECTION 605, 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: **Wolverine Management,  
LLC**
2. The name and address of the registered agent and office is:

Mathew Baum  
12800 University Drive  
Suite 275  
Fort Myers, FL 33907

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 obligation of my position as registered agent.

  
\_\_\_\_\_  
MATHEW BAUM, Registered Agent

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