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FLORIDA LIMITED LIABILITY CO.
GINOLLY 118 LLC

Certificate of Status	1
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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

OF

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GINOLLY 118 LLC

ARTICLE I - Name:

The name of the Limited Liability Company is: GINOLLY 118 LLC

ARTICLE II - Address:

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

Principal Office Address: 8701 NW 13 TERRACE
MIAMI, FL 33172

Mailing Address: 8701 NW 13 TERRACE
MIAMI, FL 33172

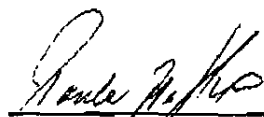
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

PAULA R. MIGLIETTI
8701 NW 13 TERRACE
MIAMI, FL 33172

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 605, F.S..



Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

H14000212766

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ARTICLE IV-

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

PAULA R. MIGLIETTI
8701 NW 13 TERRACE
MIAMI, FL 33172

MGR.

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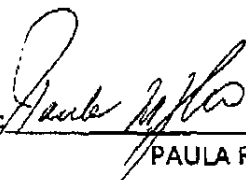
ARTICLE V-

Effective date, if other than the date of filing: (OPTIONAL).

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

IN WITNESS THEREOF, the undersigned has executed these ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY this 10TH DAY OF SEPTEMBER, 2014.

SIGNATURE: _____



PAULA R. MIGLIETTI, MGR

Signature of a member or an authorized representative of a member. (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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