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| Certified Copies | Certificates | of Status |
| Special Instructions to | Filing Officer: | |
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| TO: Registratio Division of | n Section Corporations | | |
|--------------------------------|----------------------------------------------|---------------------------------------------------------------------|--------------------------------------------------------------------------------------------|
| SUBJECT: <u>J.G.M</u> | PROPERTIES LLC Name of Lin | mited Liability Company | |
| The enclosed Article | s of Organization and fee(s) a | re submitted for filing. | |
| Please return all corre | espondence concerning this m | natter to the following: | |
| JAMES | G. MUELLER | Name of Person | |
| J.G.M. F | PROPERTIES LLC | | |
| | | Firm/Company | |
| <u>718 LA</u> Ł | KESIDE CIRCLE | Address | |
| <u>NORTH</u> | PALM BEACH, FL 33408 | | |
| | | City/State and Zip Code | |
| JGMUELLER2 | @GMAIL.COM E-mail address: (to be use | d for future annual report notifica | ation) |
| For further information | on concerning this matter, ple | ase call: | |
| JAMES G. MUELL Na | ERat (_ me of Person | | Jephone Number |
| Enclosed is a check f | or the following amount: | | |
| ☑ \$125.00 Filing Fee | □\$130.00 Filing Fee & Certificate of Status | □\$155.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed) |
| | iling Address | Street/Courier Add | ress |

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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| ARTICLE I - Name: The name of the Limited Liability Company is: | |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| J.G.M. PROPERTIES LLC | iability Company, "L.L.C.," or "LLC.") |
| | rability Company, E.E.C., of 155C.) |
| ARTICLE II - Address: The mailing address and street address of the principal office | ce of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 718 LAKESIDE CIRCLE NORTH PALM BEACH, FL 33408 | 718 LAKESIDE CIRCLE NORTH PALM BEACH, FL 33408 |
| ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own Reanother business entity with an active Florida registration.) The name and the Florida street address of the registered agents. | egistered Agent. You must designate an individual or |
| JAMES G. MUELLER | |
| Name | |
| 718 LAKESIDE CIRCLE | 75.55 24 ST |
| Florida street address (P.O. Box N | NOT acceptable) |
| NORTH PALM BEACH | FL 33408 |
| City | Zip ORIG |
| the place designated in this certificate, I hereby accept the capacity. I further agree to comply with the provisions of of my duties, and I am familiar with and accept the obliging | ice of process for the above stated limited liability company at the appointment as registered agent and agree to act in this all statutes relating to the proper and complete performance ations of my position as registered agent as provided for in 605, F.S |

(CONTINUED)

Page 1 of 2

| Title: | Name and Address: |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| "AMBR" = Authorized Member | |
| 'MGR" = Manager | |
| MGR | JAMES G. MUELLER |
| | 718 LAKESIDE CIRCLE |
| | NORTH PALM BEACH, FL 33408 |
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| EV: Effective date, if other than the date ctive date is listed, the date must be sp | e of filing: <u>FEBRUARY 20, 2015</u> . (OPTIONAL) |
| EV: Effective date, if other than the date ctive date is listed, the date must be sp f filing.) | e of filing: <u>FEBRUARY 20, 2015</u> . (OPTIONAL) |
| EV: Effective date, if other than the date ctive date is listed, the date must be sp f filing.) | e of filing: <u>FEBRUARY 20, 2015</u> . (OPTIONAL) |
| EV: Effective date, if other than the date ctive date is listed, the date must be sp f filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a modern constitutes an affirmation und I am aware that any false information. | e of filing: <u>FEBRUARY 20, 2015</u> . (OPTIONAL) |
| EV: Effective date, if other than the date ctive date is listed, the date must be sp filing.) EVI: Other provisions, if any. Signature of a me (In accordance with section 60 constitutes an affirmation und I am aware that any false inforconstitutes a third degree felorical constitutes a third degree felorical constitutes as a filing that the constitutes a third degree felorical constitutes a third degree felorical constitutes as the constitutes | e of filing: <u>FEBRUARY 20, 2015</u> . (OPTIONAL) pecific and cannot be more than five business days prior to or 90 of the period of the period of perjury that the facts stated herein are true, remation submitted in a document to the Department of State my as provided for in s.817.155, F.S.) |
| EV: Effective date, if other than the date ctive date is listed, the date must be sp f filing.) EVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a modern constitutes an affirmation und I am aware that any false information. | ender of filing: FEBRUARY 20, 2015 (OPTIONAL) pecific and cannot be more than five business days prior to or 90 of the period o |

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