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ruu ★ ★	To: Division of Corporations Fax Number : (050) 617-6301 From: Account Name : MCCARTHY, SUMMERS, EOBKO, WOOD, NORMAN, EASS & MELBY, P.A. Account Number : I19990000170 Phone : (772) 286-1700 Fax Number : (772) 293-1003 Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address: KIMCOMCCarthySummers.com
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The undersigned Authorized Representative submits the following to form a limited liability company pursuant to the Florida Revised Limited Liability Company Act:

ARTICLE I - Name:

The name of the Limited Liability Company is:

FOUNDATIONS OF ST. LUCIE COUNTY, LLC

ARTICLE II - Address:

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

1156 SE MacArthur Blvd., Stuart, FL 34996

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

1156 SE MacArthur Blvd., Stuart, FL 34996

ARTICLE III - Registered Agent/Address

The name and the Florida address of the registered agent is:

Kenneth A. Norman 2400 SE Federal Highway, Fourth Floor Stuart, FL 34994

ARTICLE IV - Management:

The Limited Liability Company is to be managed by a Manager and is therefore a managermanaged company. The name and address of the initial Manager who is authorized to manage and control the Limited Liability Company is as follows:

> Lou Ann Linekin 1156 SE MacArthur Blvd. Stuart, FL 34996

Article V – Effective Date

The effective date of the Limited Liability Company, if other than the date of filing, is June 18, 2015.

Articles of Organization FOUNDATIONS OF ST. LUCIE COUNTY, LLC

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In accordance with Florida Statutes §605.0203(1)(b), 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 Florida Statutes §817.155.

Dated: June 18, 2015.

Kenneth A. Norman, Authorized Representative

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF CHAPTER 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: FOUNDATIONS OF ST. LUCIE COUNTY, LLC
- 2. The name and Florida street address of the registered agent and office is:

<u>Kenneth A. Norman</u> (Name) <u>2400 SE Federal Highway, Fourth Floor</u> (P.O. Box <u>not</u> acceptable) <u>Stuart, FL 34994</u> (City/State/Zip)

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, Kenneth A. Norman hereby accepts the appointment as registered agent and agrees to act in this capacity. Kenneth A. Norman further agrees to comply with the provisions of all statutes relating to the proper and complete performance of its duties, and it is familiar with and accepts the obligations of its position as registered agent as provided for in Chapter 605, Florida Statutes.

Dated: June 18, 2015.

REGISTERED AGENT

Cenneth A. Norman

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Articles of Organization FOUNDATIONS OF ST. LUCIE COUNTY, LLC

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