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P. 001

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Florida Department of State
Division of Corporations
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FLORIDA LIMITED LIABILITY CO.
PALM SPRINGS SQUARE FLA LLC

Certificate of Status	0
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ARTICLES OF ORGANIZATION
FOR
PALM SPRINGS SQUARE FLA LLC

SECRETARY OF STATE
PALM SPRINGS, FLORIDA

ARTICLE I

Name

The name of the Limited Liability Company is PALM SPRINGS SQUARE FLA LLC.

ARTICLE II

Address

The mailing address and street address of the principal office of the Limited Liability Company is: 1541 Sunset Drive, Suite 300, Coral Gables, Florida 33143.

ARTICLE III

Duration

The Limited Liability Company's existence begins on the date of filing of these Articles with the State of Florida, Department of State, and shall be perpetual.

ARTICLE IV

Purpose

This Limited Liability Company is organized for the purpose of transacting any or all lawful business for which limited liability companies may be organized under the Florida Limited Liability Company Act.

ARTICLE V

Registered Agent

The street address of the initial registered office of the Limited Liability Company shall be 1541 Sunset Drive, Coral Gables, Florida 33143 and the name of the initial registered agent of the Limited Liability Company at that address is Todd Levine.

ARTICLE VI

Member-Managed Company

The Limited Liability Company is to be managed by one or more of its members and is therefore a member managed company.

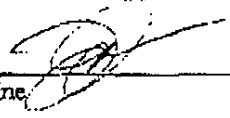
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Fax Audit No. (((H15000173470 3)))

The undersigned, being one of the members of PALM SPRINGS SQUARE FLA LLC
hereby executes these Articles of Organization on this ____ /k____ day of July, 2015.



Todd Levine

Fax Audit No. (((H15000173470 3)))

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ACCEPTANCE BY
REGISTERED AGENT

1. The name of the limited liability company is PALM SPRINGS SQUARE FLA LLC.
2. The name and the Florida street address of the registered agent are:

Todd Levine
1541 Sunset Drive
Suite 300
Coral Gables, FL 33143

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.


TODD LEVINE

Fax Audit No. (((H15000173470 3)))