Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H15000190714 3))) -



H150001907143ABC

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

LO

 $\ddot{\sim}$

 \overline{a}

10

Division of Corporations

Fax Number : (850)617-6381

Account Name : STEARNS WEAVER MILLER WEISSLER ALHADEFF & SITTERSON

Account Number : I20060000135 : (305)789-3200 Phone Fax Number : (305)789-3395

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.
Email Address: FMONUALLO STEGMASURGUES. COM

FLORIDA LIMITED LIABILITY CO. SYNERGY RENTS JACKSONVILLE, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION OF SYNERGY RENTS JACKSONVILLE, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Revised Limited Liability Company Act, Florida Statutes Chapter 605, as amended, hereby makes, acknowledges and files the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company is Synergy Rents Jacksonville, LLC (the "Company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Company is 2900 Ponce de Leon Boulevard, Suite 500, Coral Gables, FL 33134.

ARTICLE III - DURATION

The period of duration for the Company shall be perpetual.

ARTICLE IV - REGISTERED OFFICE AND AGENT AND ADDRESS

The name and street address of the registered agent and the registered office of the Company in the State of Florida are:

> Name <u>Address</u>

2900 Ponce de Leon Boulevard Juan Carlos Mas

Suite 500

Coral Gables, FL 33134

The Company shall be member managed. The name and address of the initial authorized that is:

member is:

Synergy Rents, LLC 2900 Ponce de Leon Boulevard, Suite 500 Coral Gables, FL 33134

IN WITNESS WHEREOF, the undersigned has made and subscribed these Articles of

Organization for the foregoing uses and purposes this 6th day of August 2015.

Juan Carlos Mas,

Authorized Representative

REGISTERED AGENT'S ACCEPTANCE

Having been named as registered agent and to accept service of process for Synergy Rents Jacksonville, LLC at the place designated in this certificate, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his duties, and is familiar with and accepts the obligations of his position as registered agent as provided for in Chapter 605, Florida Statutes.

Dated: August 6, 2015

Juan Carlos Mas, Registered Agent

15 JUL -6 AM 10: 06
SECRETARY OF STATE