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.         U((H16000047479 3)))         U((H1600047479 3)))         U((H1600047479 3)))         U((H1600047479 3)))         U((H1600047479 3))         U((H1600100010000000000000000000000000000	D2/24/2016 10:16 FAX Division of Corporations Division of Corporations Florida Department of State Division of Corporations Electronic Filing Cover Sheet	☑ 0001/0003 age 1 of 2
Image: Control of Corporations       Image: Control of Corporations         To:       Division of Corporations         Cacount Number:       120010000128         Prome:       (239)659-38012         **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**         Imail Address:       Evasque20bsk.com         Evasting Editation of Status       1         Evasting Editation of Corporations       1         Enail Address:       Evasque20bsk.com         Evasting Editation of Status       1		
With and a state of the st		
Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.       Image: Doing so will generate another cover sheet.         To:       Division of Corporations Fax Number : (850) 617-6381       Image: Doing so will generate another cover sheet.         From:       Account Name : BOND, SCHOENECK & KING, PLLC Account Number : I20010000122 Phone : (239) 659-3800 Fax Number : (239) 659-3800 Fax Number : (239) 659-3812         **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**         Email Address:       evasque2@bsk.com         FLORIDA LIMITED LIABILITY CO. If Six Were Nine/Lincoln Road, LLC       Image: Doing Status 1         Certified Copy       0         Page Count       02         Estimated Charge       S130.00		(^
annual report mailings. Enter only one email address please.** Email Address: evasquez@bsk.com FLORIDA LIMITED LIABILITY CO. If Six Were Nine/Lincoln Road, LLC Certificate of Status 1 Certified Copy 0 Page Count 02 Estimated Charge \$130.00	page. Doing so will generate another cover sheet.	
	annual report mailings. Enter only one email address please.** Email Address: evasquez@bsk.com FLORIDA LIMITED LIABILITY CO. If Six Were Nine/Lincoln Road, LLC Certificate of Status 1 Certified Copy 0 Page Count 02 Estimated Charge \$130.00	16 FE8 24 PRIZE 1

T

- ----

i.



(((H16000047479 3)))

Ø0002/0003

B

2

Я

# ARTICLES OF ORGANIZATION

#### OF

### IF SIX WERE NINE/LINCOLN ROAD, LLC

#### ARTICLE I – NAME

The name of the limited liability company is IF SIX WERE NINE/LINCOLN ROAD, LLC ("Company").

#### ARTICLE II – ADDRESS

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

Principal Office Address: 2950 Tamiami Trail N. Suite 200 Naples, Florida 34103 <u>Mailing Address</u>: 2950 Tamiami Trail N. Suite 200 Naples, Florida 34103

#### ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

Eric J. Vasquez 4001 Tamiami Trail North, Suite 250 Naples, FL 34103

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.

Eric J. Vasquer, Registered Agent	

436549.1



(((H16000047479 3)))

Ø0003/0003

## **ARTICLE IV - MANAGER**

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

<u>Title</u>:

Manager (MGR)

Name and Address:

George Vukobratovich 2950 Tamiami Trail N. Suite 200 Naples, Florida 34103



**REQUIRED SIGNATURE:** 

Signature of a members an authorized representative of a member.

(In accordance with section 605.205(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Eric J. Vasquez Typed or printed name of signee