4/21/2016



Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

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FLORIDA LIMITED LIABILITY CO.

Northeast Properties LLC

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Electronic Filing Menu

Corporate Filing Menu

Help

To:

FAX AUDIT#

ARTICLES OF ORGANIZATION **OF** Northeast Properties LLC

ARTICLE I

NAME

The name of the limited liability company is: Northeast Properties LLC

ARTICLE II

ADDRESS

The principal place of business and mailing address of this Limited Liability Company shall be-1419 S. Meridian St., Tallahassee, Florida 32301.

ARTICLE UI

INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the registered agent are: Judy Spier, 1419 S. Meridian St., Tallahassee, Florida 32301. Located in the County of Leon.

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.

Signature:

Date: 4-20, 2016

ARTICLE IV

MANAGERS/MEMBERS

The management of the limited liability company is reserved for the members and the name and address of the member of the Limited Liability Company is: Judy Spier, 1419 S. Meridian St., Tallahassee, Florida 32301

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FAX AUDIT # 4/160000990003

ARTICLEV

DURATION

The duration for the limited liability company shall be: Perpetual.

Judy Spier Organizer

Date: 4. 20. 2016

Authorized Representative

(in accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated lièrein are true. I aim aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)