

**L16000144156**

Florida Department of State  
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**FLORIDA LIMITED LIABILITY CO.  
SFACS Real Estate. LLC**

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AUG 05 2016

T. SCOTT

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**ARTICLES OF ORGANIZATION  
OF  
SFACS REAL ESTATE, LLC**

**ARTICLE I - Name**

The name of the Limited Liability Company is SFACS Real Estate, LLC (the "Company").

**ARTICLE II - Address**

The mailing address and street address of the principal office of the Company is 18305 NW 75 Place, Hialeah, Florida 33015.

**ARTICLE III - Management**

The Company shall be managed by its member and is therefore a member-managed Company. The name and address of the managing member is the Company is South Florida Autism Center, Inc., 18305 NW 75 Place, Hialeah, Florida 33015.

**ARTICLE IV - Registered Agent and Office**

The street address of the Company's initial registered office is 1200 South Pine Island Road, Plantation, Florida 33324, and the name of its initial registered agent at such office is NRAI Services, Inc.

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 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 s.817.155, F.S.

Dated this 4<sup>th</sup> day of August, 2016

  
\_\_\_\_\_  
Debra Palmisano  
Authorized Person

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**ACCEPTANCE OF APPOINTMENT OF REGISTERED AGENT**

The undersigned, having been named as Registered Agent and to accept service of process for **SFACS Real Estate, LLC** at the place designated in these Articles of Organization, 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 its duties, and is familiar with and accepts the obligations of its position as registered agent as provided for in Florida Statutes Chapter 605.

Dated this 4<sup>th</sup> day of August, 2016

NRAI SERVICES, INC.

By: \_\_\_\_\_

Name: \_\_\_\_\_

Title: \_\_\_\_\_

*Conita Buzyn*

*Conita Buzyn*

*Assistant Secretary*