11600194927

/Da	equestor's Name)	
(Ne	questors marne)	
·		
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Name	e)
•	•	,
(Dr	ocument Number)	
(50	, out the truth boty	
On although On the c	O - AFF - A	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	





800291363248

10/20/16--01017--018 **125.00

M. MOON OCT 20 2016

COVER LETTER

	Registration Section Division of Corporations				
CUD ID	FGI Metrolina GP, LLC				
SUBJEC		Limited Liabi	lity Company		
The enclo	sed Articles of Organization and fee(s)	are submitted	i for filing.		
	urn all correspondence concerning this				
	Richard Knepfler		•		
		Name o	f Person	-	
	Fundamental Global Investors, LLC	•			
			отралу	-	
	9130 Galleria Ct, 3rd Floor			15 (
		Add	ress	. 100	÷
	Naples, FL 34109			20	
	rich@cwafgi.com	City/State a	nd Zip Code	· 표	•
	E-mail address: (to be u	sed for future	annual report notification)	53	آرن حرد
For further	information concerning this matter, ple	ease call:		ī.,	۰ مور
	Richard Knepfler	239	566-4821		
	Name of Person	Area Code	Daytime Telephone Number		
Enclosed	is a check for the following amount:				
	Filing Fee \$130.00 Filing Fee & Certificate of Status	Certit	00 Filing Fee & \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address New Filing Section Division of Corporations Clifton Building 2661 Executive Center Circle Tailahassee, FL 32301		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FG1 Metrolina GP, L	ıc		
	with the words "Limited	Liability Company.	"L.L.C" or "LLC.")
(,	,
ARTICLE II - Address:		- 6.5 * 5 * 6.	
The mailing address and street ad	idress of the principal of	lice of the Limited	Liability Company is:
<u>Princips</u>	al Office Address:		Mailing Address:
9130 Galleria Ct, 3rd	Floor	9130	Galleria Ct, 3rd Floor
Naples, FL 34109 ARTICLE III - Registered Age (The Limited Liability Company	ent, Registered Office, d	& Registered Agen Registered Agent. \	
Naples, FL 34109 ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	ent, Registered Office, d cannot serve as its own active Florida registration	& Registered Agen Registered Agent. \	t's Signature:
Naples, FL 34109 ARTICLE III - Registered Age (The Limited Liability Company	ent, Registered Office, d cannot serve as its own active Florida registration	& Registered Agen Registered Agent. \	t's Signature:
Naples, FL 34109 ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	ent, Registered Office, d cannot serve as its own active Florida registration address of the registered	& Registered Agen Registered Agent. \	t's Signature:
Naples, FL 34109 ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	ent, Registered Office, d cannot serve as its own active Florida registration address of the registered	Registered Agent. No.) agent are:	t's Signature:
Naples, FL 34109 ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	ent, Registered Office, de cannot serve as its own active Florida registration address of the registered Blaine Ferguson	& Registered Agent. Your agent are: Name	t's Signature: 'ou must designate an individu
Naples, FL 34109 ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a	ent, Registered Office, decannot serve as its own active Florida registration address of the registered Blaine Ferguson 9130 Galleria Ct, 3rd	& Registered Agent. Your agent are: Name	t's Signature: 'ou must designate an individu

naving oven namea as registered agent and to accept service of process for the above stated timited ttability 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..

Registered Agant's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

Title: "AMBR" = Aut "MGR" = Mana	thorized Member	Name and Address:
MGR		Daniel K Cerminara 131 Plantation Ridge Dr, Suite 100
		Mooresville, NC 28117

(Use attachmen	it if necessary)	
Tective date is lis	date, if other than the date of ited, the date must be speci	filing: (OPTIONAL) file and cannot be more than five business days prior to or 90 c
Tective date is list of filing.) If the date inserte	ited, the date must be speci	ific and cannot be more than five business days prior to or 90 c et the applicable statutory filing requirements, this date will not b
Tective date is list of filing.) If the date inserte ument's effective	ited, the date must be speci d in this block does not mea date on the Department of	ific and cannot be more than five business days prior to or 90 c et the applicable statutory filing requirements, this date will not b
Tective date is list of filing.) If the date inserte amont's effective LE VI: Other pro	ited, the date must be speci d in this block does not mea date on the Department of	ific and cannot be more than five business days prior to or 90 c et the applicable statutory filing requirements, this date will not b
Tective date is list of filing.) If the date insertenment's effective LE VI: Other pro	ited, the date must be special in this block does not mead date on the Department of evisions, if any.	ific and cannot be more than five business days prior to or 90 cet the applicable statutory filing requirements, this date will not be State's records.
fective date is list of filing.) If the date inserte iment's effective LE VI: Other pro	d in this block does not meet date on the Department of evisions, if any. GIGNATURE: Signature of a memion of this document is executed an aware that any false in	ific and cannot be more than five business days prior to or 90 c et the applicable statutory filing requirements, this date will not b
fective date is list of filing.) If the date inserte iment's effective LE VI: Other pro	d in this block does not meet date on the Department of evisions, if any. GIGNATURE: Signature of a memory false in constitutes a third degree for Daniel Kyle Cermin	the applicable statutory filing requirements, this date will not be State's records. Der or an authorized representative of a member. It in accordance with section 605.0203 (1) (b), Florida Statutes. Information submitted in a document to the Department of State elony as provided for in s.817.155, F.S.
Tective date is list of filing.) If the date insertenment's effective LE VI: Other pro	d in this block does not meet date on the Department of evisions, if any. GIGNATURE: Signature of a memory false in constitutes a third degree for Daniel Kyle Cermin	the applicable statutory filing requirements, this date will not be State's records. ber or an authorized representative of a member. It in accordance with section 605.0203 (1) (b), Florida Statutes. Information submitted in a document to the Department of State elony as provided for in s.817.155, F.S.
Tective date is list of filing.) If the date inserte ument's effective LE VI: Other pro	d in this block does not meet date on the Department of evisions, if any. GIGNATURE: Signature of a mem This document is executed I am aware that any falso it constitutes a third degree for Daniel Kyle Cermin	the applicable statutory filing requirements, this date will not be State's records. Der or an authorized representative of a member. It in accordance with section 605.0203 (1) (b), Florida Statutes. Information submitted in a document to the Department of State elony as provided for in s.817.155, F.S.
Tective date is list of filing.) If the date inserte iment's effective LE VI: Other pro REQUIRED S \$125.00 Filin	d in this block does not meet date on the Department of evisions, if any. GIGNATURE: Signature of a mem This document is executed I am aware that any falso it constitutes a third degree for Daniel Kyle Cermin	the applicable statutory filing requirements, this date will not be State's records. ber or an authorized representative of a member. It in accordance with section 605.0203 (1) (b), Florida Statutes. aformation submitted in a document to the Department of State elony as provided for in s.817.155, F.S.

Page 2 of 2