## L16000197961

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| (Requestor's Name)                      |
| (Address)                               |
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| (City/State/Zip/Phone #)                |
| PICK-UP WAIT MAIL                       |
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DEPONEST OF SAN

C. GOLDEN 0CT 3 1 2016 CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500

| Phone: 850-558-1500  |  |
|--|--|
| ACCOUNT NO. : 12000000195  |  |
| REFERENCE : 348596 4348161   |  |
| AUTHORIZATION: Squelle le man  |  |
| COST LIMIT : \$ 125.00   |  |
| ORDER DATE : October 27, 2016  |  |
| ORDER TIME : 3:41 PM   |  |
| ORDER NO. : 348596-005   |  |
| CUSTOMER NO: 4348161   |  |
|  |  |
| DOMESTIC FILING  |  |
| NAME: BRIAN ANN PARTNERS, LLC  |  |
| EFFECTIVE DATE:  |  |
| ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION |  |
| PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:  |  |
| CERTIFIED COPY  XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING                       |  |
| CONTACT PERSON: Courtney Williams - EXT. 62935   |  |
| EXAMINER'S INITIALS:   |  |

## COVER LETTER

|            | Registration Section<br>Division of Corporations  |   |          |
|------------|---|---|----------|
| CUDIEC     | Brian Ann Partn   | ers, LLC  |          |
| SUBJEC     | Name of Limited Li  | ability Company   |          |
| The enclo  | osed Articles of Organization and fee(s) are submi  | tted for filing.  |          |
| Please ret | turn all correspondence concerning this matter to t   | he following:   |          |
|            | John J. Ferguson, Esq.  |   |          |
|            | Nam   | e of Person   |          |
|            | Ferguson Cohen LLP  |   |          |
|            | Firm  | VCompany  |          |
|            | 25 Field Point Road   |   |          |
|            |   | Address   |          |
|            | Greenwich, Connecticut 06830  |   |          |
|            | City/Stati  | te and Zip Code   |          |
|            | E-mail address: (to be used for fut   | ure annual report notification)   |          |
| For furthe | r information concerning this matter, please call:  |   |          |
|            | John J. Ferguson, Esq. 203  | 661-5222, Ext. 211  |          |
|            | Name of Person Area Co  | de Daytime Telephone Number   |          |
| Enclosed   | d is a check for the following amount:  |   |          |
| \$125.00   | Certificate of Status   | 155.00 Filing Fee & \$160.00 Filing Fee, ertified Copy itional copy is enclosed) \$Certificate of Status & Certified Copy (additional copy is enclosed) | i)       |
|            | 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  Tallabasses FL 32301                      | 16 001 2 |

FILED

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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|-------|----|---------|---|---|----|---|---|----|----|
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The name of the Limited Liability Company is.

Brian Ann Partners, LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

## ARTICLE II - Address:

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

| Principal Office Address: | Mailing Address:        |
|---------------------------|-------------------------|
| c/o William E. Flaherty   | c/o William E. Flaherty |
| 315 Chapel Hill Road      | 315 Chapel Hill Road    |
| Palm Beach, FL 33480      | Palm Beach, FL 33480    |

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

| Brian Flaherty      |                            |            |
|---------------------|----------------------------|------------|
|                     | Name                       |            |
| 315 Chapel Hill Roa | ıd                         |            |
|                     | ss (P.O. Box <u>NOT</u> ac | cceptable) |
| Palm Beach          | FL                         | 33480      |
| City                | State                      | Zip        |

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..

CRegistered Agent | Signature (REQUIRED)

BRIAN FLAHERTY

(CONTINUED)

Page I of 2

| Title: "AMBR" = Authorized Member  | Name and Address:   |              |
|--|---|--------------|
| "MGR" = Manager  |   |              |
| Managing Member  | Brian Flaherty  |              |
|  | c/o William E. Flaherty   |              |
|  | 315 Chapel Hill Road, Palm Beach. FL 33480  |              |
| Managing Member  | Ann Music Platery ANNMARIE FLAHERTY   | - S H        |
|  | c/o William E. Flaherty   | <b>J</b>     |
|  | 315 Chapel Hill Road, Palm Beach FL 33480   |              |
|  |   |              |
|  |   |              |
|  |   |              |
|  |   |              |
|  |   |              |
|  |   |              |
| at   |   |              |
| (Use attachment if necessary)  |   |              |
| E V: Effective date if other than the date of  | filing: (OPTIONAL)  |              |
| ment's effective date on the Department of  E VI: Other provisions, if any.  | State s records.  | <del> </del> |
| E VI: Other provisions, if any.  | State s records.  |              |
| ·  | State s records.  |              |
| E VI: Other provisions, if any.  REQUIRED SIGNATURE:   |   |              |
| REOUIRED SIGNATURE:  Signature of a mem This document is executed I am aware that any false in   | ber or an authorized representative of a member.  d 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.   |              |
| REOUIRED SIGNATURE:  Signature of a mem This document is executed I am aware that any false is constitutes a third degree for  | ther or an authorized representative of a member.  If in accordance with section 605.0203 (1) (b), Florida Statutes information submitted in a document to the Department of State  |              |
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| REQUIRED SIGNATURE:  Signature of a mem This document is executed I am aware that any false is constitutes a third degree f Brian Flaherty  \$125.00 Filing Fee for Articles of Organ                                    | ber or an authorized representative of a member. d 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.  Typed or printed name of signee   |              |
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ARTICLE IV-