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| (Re | questor's Name) | | | |
|---|-------------------|-------------|--|--|
| (Address) | | | | |
| (Address) | | | | |
| · (Cit | y/State/Zip/Phone | e #) | | |
| PICK-UP | ☐ WAIT | MAIL | | |
| (Business Entity Name) | | | | |
| (Document Number) | | | | |
| Certified Copies | _ Certificates | s of Status | | |
| Special Instructions to Filing Officer: | | | | |
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| To: | Distriction of Co. 42 | By a some Br |
|------------------|---|---|
| 10: | Registration Section Division of Corporations | |
| | Division of Corporations | |
| SUBJI | Rich Group of Jensen Beach, LLC | : |
| | | Limited Liability Company |
| The | alam 1 Amii Iaa of Oano iin dian an 1 6 o (|) |
| ine en | closed Articles of Organization and fee(s |) are submitted for fitting. |
| Please | return all correspondence concerning this | s matter to the following: |
| | Bruce S. Rosenwater, Esquire | |
| | | Name of Person |
| | Bruce S Rosenwater & Associates, | P.A. |
| | | Firm/Company |
| | 1601 Forum Place, Suite 610 | |
| | | Address |
| | West Palm Beach, FL 33401 | |
| | | City/State and Zip Code |
| | info@rosenwater.com | |
| | E-mail address: (to be u | sed for future annual report notification) |
| For furtl | ner information concerning this matter, pl | ease call: |
| | Bruce S. Rosenwater | 561 688-0991 |
| | Name of Person | Area Code Daytime Telephone Number |
| Caslan | ad in a short. Construction for the construction | |
| | ed is a check for the following amount: | |
|] \$125,0 | 00 Filing Fee \$130.00 Filing Fee & Certificate of Status | S155.00 Filing Fee & S160.00 Filing Fee, Certified Copy (additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed) |
| | Mailing Address | Street Address |
| | New Filing Section | New Filing Section |
| | Division of Corporations | Division of Corporations |
| | P.O. Box 6327 Tallahassee, FL 32314 | Clifton Building 2661 Executive Center Circle |
| | 4 00 140 1 100 2 2 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 | LOUI LACCHITE CHIEF CHEE |

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Name: | | | | |
|---|---------------------|----------------------|--|--|
| The name of the Limited Liability | ly Company is: | | | |
| Rich Group of Jensei | n Beach IIIC | | | |
| Rich Group of Jensen Beach, 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: | | | | |
| <u>Princip</u> | al Office Address: | Mailing Address: | | |
| 3535 Windsor Place | | 3535 Windsor Place | | |
| Boca Raton, FL 3349 | 06 | Boca Raton, FL 33496 | | |
| | | | | |
| 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: | | | | |
| | Bruce S. Rosenwater | | | |
| Name | | | | |
| 1601 Forum Place, Suite 610 | | | | |
| Florida street address (P.O. Box NOT acceptable) | | | | |
| | West Palm Beach F | L 33401 | | |

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..

City

State

Registered Agent's Signature (REQUIRED)

Zip

(CONTINUED)

Page 1 of 2

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ARTICLE IV-

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

| Title: "AMBR" = Authorized Member | Name and Address: | | | |
|--|--|--|--|--|
| "MGR" = Manager | | | | |
| MGR - Manager MGR | Jerome L. Rich and Jodi Lynn Rich as Co-Trustees | | | |
| | of the Jaclyn Rich Family Trust | | | |
| | 3535 Windsor Place, Boca Raton, FL 33496 | | | |
| MGR | Jerome L. Rich and Jodi Lynn Rich as Co-Trustees | | | |
| | of the Spencer Rich Family Trust | | | |
| | 3535 Windsor Place, Boca Raton, FL 33496 | | | |
| MGR | Jerome L. Rich and Jodi Lynn Richas Co-Trustees | | | |
| | of the Miles Rich Family Trust | | | |
| | 3535 Windsor Place, Boca Raton, FL 33496 | | | |
| | | | | |
| | | | | |
| | | | | |
| (Use attachment if necessary) | | | | |
| (Ose attachment if necessary) | | | | |
| ARTICLE V: Effective date, if other than the date of | filing: Upon filing of these Articles (OPTIONAL) | | | |
| (If an effective date is listed, the date must be specif | fic and cannot be more than five business days prior to or 90 days after | | | |
| the date of filing.) | | | | |
| | t the applicable statutory filing requirements, this date will not be listed a | | | |
| the document's effective date on the Department of | State's records. | | | |
| ARTICLE VI: Other provisions, if any. | | | | |
| | | | | |
| | | | | |
| | | | | |
| REOUIRED SIGNATURE: | | | | |
| | | | | |

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Bruce S. Rosenwater

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Page 2 of 2