Division of Corporations Electronic Filing Cover Sheet

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To:

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Fax Number

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From:

Account Name : JOHNSON, POPE, BOKOR, RUPPEL & BURNS, LLP.

Account Number : 076666002140 Phone

: (727)461-1818

Fax Number : (727)441-8617

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

- Rmail Address:

FLORIDA LIMITED LIABILITY CO.

ENCORE - SYLVESTER, LLC

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$125.00 |

ARTICLES OF ORGANIZATION OF ENCORE - SYLVESTER, LLC

The undersigned, acting as the organizer of a limited liability company to be formed under the Florida Limited Liability Company Act, as amended (the "Act"), hereby forms a Florida limited liability company (this "Company") pursuant to the Act and hereby sets forth the following Articles of Organization (these "Articles"):

ARTICLE I Name

The name of this Company shall be: ENCORE - SYLVESTER, LLC

ARTICLE II Place of Business

The principal place of business and mailing address of this Company shall be 100 Main Street, Suite 302, Safety Harbor, Florida 34695, and such other place or places as may be designated by the manager from time to time.

ARTICLE III Registered Agent and Office

The initial registered agent for this Company shall be Steven A. Williamson, and the address of the registered agent for service of process shall be 911 Chestnut Street, Clearwater, Florida 33756.

ARTICLE IV Management of Business

The Company shall be manager-managed. The initial manager of the company is Cullen Hawkins, whose mailing address is 100 Main Street, Suite 302, Safety Harbor, Florida 34695.

The undersigned has executed these Articles of Organization this 8th day of March 2017.

STEVEN A. WILLIAMSON

Authorized Representative

Prepared By:

Steven A. Williamson, Esquire
Johnson, Pope, Bokor, Ruppel & Burns, LLP
911 Chestnut Street
Clearwater, Florida 33756
(727) 461-1818
Bar No. 655961

17 MAR -9 AM 8: 07
SECRETARY OF STATE
TALLAHASSEE FROM

CERTIFICATE OF DESIGNATION AND ACCEPTANCE OF REGISTERED AGENT

The undersigned, having been named Registered Agent and designated to accept service of process for the above-stated Company at 911 Chestnut Street, Clearwater, Florida 33756, hereby agrees to act in this capacity, and further agrees to comply with the provisions of all statutes relative to the proper and complete performance of the duties hereunder.

Dated this 8th day of March 2017.

STĘYEN A. WILLIAMSON

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Email Address:

FLORIDA LIMITED LIABILITY CO. Garret Max Upchurch, PLLC

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Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORIGINATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is: Garret Max Upchurch, PLLC

ARTICLE I NAME

;.,

| ARTICLE II PRINCIPAL AND MAILING OFFICE ADDRESS. The principal place of business/mailing address is: | 799 Arthurs Court Tatpon Springs FL 34689 | |
|---|---|--|
| ARTICLE III Registered Agent, Registered Office & Registered Ager | u's Signature: | |
| The name and Florida Street address of the initial registered agent is: | Garret Max Upchurch 799 Arthurs Court Tarpon Springs FL 34689 | |
| Having been named as registered agent and to accept service of pencess for the above stated limited liability company at the place designated in my certificate. I hereby accept the appointment as registered agent and agree to act in this enpactive. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and any lamillar with and accept the obligations of my position as registered agent as provided for in Chapter 605, P.S. | | |
| At II | 31411+ | |
| ARTICLE IV Manager(s) The name, title and address of each person authorized to manage and control to | Date fig Limited Liability Company; | |
| | Garret Max Upchurch - Manager | |
| | 799 Arthurs Court | |
| | Tarpon Springs FL 34689 | |
| ARTICLE V EFFECTIVE DATE The effective date of this filling: ARTICLE VI BUSINESS PURPOSE | Immediately upon filings FLORIDA Real Estate Agent | |
| | Real Estate Agent 000 | |
| Signature of a member or an authorized representative of a member. Florida Statutes, the execution of this document constitutes an affirmation unherein are true. I am aware that any false information submitted in a documen constitutes a third described by a provided for in s.817.155, F.S.) Signature/Incorporates/MGR. | (In accordance with section 605,0203 (1) (b), titler the negatives of periors that the lasts stated | |
| Garret Max Unchurch | | |
| Printed nume of Signee | | |