

**Electronic Articles of Organization
For
Florida Limited Liability Company**

L17000068094
FILED 8:00 AM
March 24, 2017
Sec. Of State
jafason

Article I

The name of the Limited Liability Company is:

LAI KOK LAI III, LLC

Article II

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

4851 WOOD POINTE WAY
SARASOTA, FL. UN 34233

The mailing address of the Limited Liability Company is:

4851 WOOD POINTE WAY
SARASOTA, FL. UN 34233

Article III

Other provisions, if any:

TO RENT, LEASE, BUY, SELL, EXCHANGE OR OTHERWISE MANAGE
REAL PROPERTY IN THE STATE OF FLORIDA AND TO PERFORM ANY
OTHER ACT OR ACTIVITY LEGAL IN THE JURISDICTION IN WHICH IT
OPERATES.

Article IV

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

BRENDEN S MORIARTY
1001 THIRD AVENUE WEST SUITE 650
BRADENTON, FL. 34205

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.

Registered Agent Signature: BRENDEN S. MORIARTY

Article V

The name and address of person(s) authorized to manage LLC:

Title: AMBR
LAI K LAI
4851 WOOD POINTE WAY
SARASOTA, FL. 34233 US

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Signature of member or an authorized representative

Electronic Signature: LAI KOK LAI

I am the member or authorized representative submitting these Articles of Organization and affirm that the facts stated herein are true. I am aware that 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. I understand the requirement to file an annual report between January 1st and May 1st in the calendar year following formation of the LLC and every year thereafter to maintain "active" status.