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FLORIDA LIMITED LIABILITY CO.
ECLIPSE 818 LLC

Certificate of Status	0
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11/21/2017

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I – Name:

The name of the Limited Liability Company is:

ECLIPSE 818 LLC

ARTICLE II – Address:

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

1000 S POINTE DRIVE #305
MIAMI BEACH, FLORIDA 33139

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

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

JOHN NICHOLS
14890 SW 76TH COURT
PALMETTO BAY, FLORIDA 33158

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 608, F.S.



JOHN NICHOLS
Registered Agent

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true)



JOHN NICHOLS
Authorized Representative