

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

L17000242634

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H17000309747 3)))



H170003097473ABC5

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:
 Division of Corporations
 Fax Number : (850)617-6381

From:
 Account Name : LLOYD GRANET
 Account Number : 074632001025
 Phone : (561)999-9300
 Fax Number : (561)999-9400

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

Email Address: goldigobberg108@gmail.com

**FLORIDA LIMITED LIABILITY CO.
 HWP RG 1391 LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

RECEIVED
 17 NOV 27 PM 12:14
 BUREAU OF COMMERCIAL
 INFORMATION SERVICES

17 NOV 27 PM 1:18
 FILED

[Electronic Filing Menu](#)
 [Corporate Filing Menu](#)
 [Help](#)

NOV 28 2017

K. Brumbley

Fax Audit: (((H17000309747 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the limited liability company is:

HWP RG 1391 LLC

ARTICLE II - Address:

The street and mailing address of the principal office of the limited liability company is:

25700 SCIENCE PARK DRIVE
SUITE 365
BEACHWOOD, OH 44122

ARTICLE III - Initial Manager

The limited liability company is manager managed.
The initial Manager of the limited liability company shall be:

GOLD-WAVES MANAGEMENT LLC

17 NOV 27 PM 18
FILED

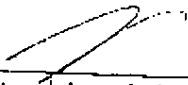
which may act on behalf of the Company and is authorized, empowered and directed to do or cause to be done all such acts or things and to sign and deliver, or cause to be signed and delivered, all documents, instruments and certificates in the name and on behalf of the Company. It shall serve until it shall resign or a replacement shall be elected.

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


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

Lloyd Granet, P.A.
2295 NW Corporate Boulevard, Suite 235
Boca Raton, FL 33431-7330

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.


By: Registered Agent's Signature

(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true). 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.)


Signature of a member or an authorized representative of a member

Lloyd Granet