

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

L18000021989
FILED 8:00 AM
January 24, 2018
Sec. Of State
rwhite

Article I

The name of the Limited Liability Company is:

THE MABLE PARTNERS, LLC

Article II

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

2831 NORTH TAMIAMI TRAIL
SARASOTA, FL. 34234

The mailing address of the Limited Liability Company is:

1001 COCOANUT AVE
SARASOTA, FL. 34236

Article III

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

JENNIFER A MCCLAIN
3415 MAGIC OAK LANE
SARASOTA, FL. 34232

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: JENNIFER A MCCLAIN

Article IV

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

Title: AMBR
ROBERT T YURCKONIS
1001 COCOANUT AVENUE
SARASOTA, FL. 34236

Title: AMBR
JOHN T JACOY
7227 CAPTAIN KIDD AVE
SARASOTA, FL. 34231

Title: AMBR
MARK CARAGIULO
1734 BAHIA VISTA STREET
SARASOTA, FL. 34239

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Article V

The effective date for this Limited Liability Company shall be:

01/24/2018

Signature of member or an authorized representative

Electronic Signature: ROBERT YURKONIS

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.