

118 000 086 021

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

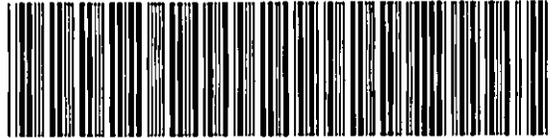
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2018 APR -9 PM 4: 21
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TALLAHASSEE, FLORIDA

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18 APR -9 AM 8: 25
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

D O'KEEFE
APR 10 2018



CORPORATION SERVICE COMPANY
1201 Hays Street
Tallahassee, FL 32301
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 152995 7628966

AUTHORIZATION : *[Signature]*

COST LIMIT : \$ 125.00

ORDER DATE : April 9, 2018

ORDER TIME : 3:49 PM

ORDER NO. : 152995-010

CUSTOMER NO: 7628966

DOMESTIC FILING

NAME: PHM WARWICK 2018 INVESTOR LLC

EFFECTIVE DATE:

_____ ARTICLES OF INCORPORATION
_____ CERTIFICATE OF LIMITED PARTNERSHIP
XX _____ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner - EXT.

EXAMINER'S INITIALS: _____

Articles of Organization

Florida Limited Liability Company

Article I

The name of the Limited Liability Company is:
PHM WARWICK 2018 INVESTOR LLC

Article II

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

c/o PINNACLE HOTEL
MANAGEMENT COMPANY
1480 ROYAL PALM BLVD.
SUITE A
ROYAL PALM BEACH, FL. US 33411

The mailing address of the Limited Liability Company is:

c/o PINNACLE HOTEL
MANAGEMENT COMPANY
1480 ROYAL PALM BLVD.
SUITE A
ROYAL PALM BEACH, FL. US 33411

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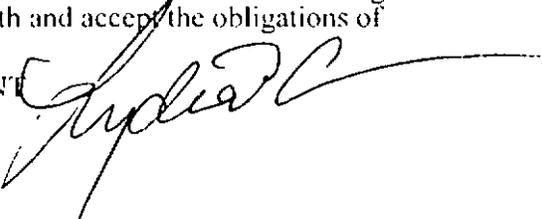
Article III

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

CORPORATION SERVICE COMPANY
1201 HAYS ST.
TALLAHASSEE, FL. 32301

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: LYDIA COHEN, ASST. VICE PRESIDENT



Article IV

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

PHM WARWICK 2018 MANAGER LLC

Title: MGR
STEVEN J FAIRBANKS
1480 ROYAL PALM BEACH BLVD., STE. A
ROYAL PALM BEACH, FL. 33411 US

Title: MGR
RONALD E FRANKLIN
1480 ROYAL PALM BEACH BLVD., STE. A
ROYAL PALM BEACH, FL. 33411 US

Signature of member or an authorized representative

Signature: STEVEN J. FAIRBANKS

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.

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18 APR -9 AM 8:25
SECRETARY
TALLAHASSEE, FL

