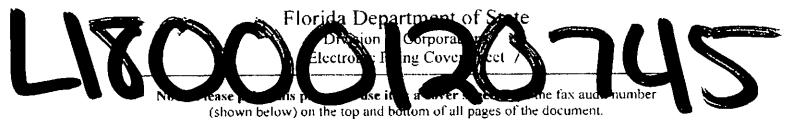
5/15/2018

Division of Corporations



(((H180001506583)))



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Division of Corporations

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: (850)617-6381

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (614)280-3338 Fax Number : (954)208-0845

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

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FLORIDA LIMITED LIABILITY CO.

Bembury Devco, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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Help



AKTICLES OF ORGANIZATION FOR PLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	Company ist.		
Hembury Deveo, LLC (Must end w	of the words "Limited	I Liability Company,	"L.L.C.," or "LLC.")
ARTICLE II - Address: The mailing address and street ad-			
Principa	1 Office Address:		Mailing Address:
163 Edgemere Way South Naples, FL 34	105	South	dgemere Way Naples, FL 34105
ARTICLE III - Registered Ages (The Limited Liability Company another business entity with an ac	cannot serve as its owr	i Registered Agent. Y	r's Signuture: ou must designate an individual or
The name and the Florida street a	ddress of the registere	d agent are:	
	CT Corporation 5ys	lem	<u></u>
	1200 South Pine Isla Florida street addres	and Road 55 (P.O. Box <u>NOT</u> ac	ceptable)
	Plantation	Florida	33324
	City	State	Zip

Having been named as registered agant and to accept service of process for the above stated limited liability company at the place designated in this certificate. Thereby 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..

A. O. A. O. A. D. M. Halpin

Assistant Secretary
Registere Gent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV-

"AMBR" = Authorized Member	Name and Address:
DE 172719 m N Junganon	
"MGR" = Manager MGR	Ronald Goldsmith
	8231 Bay Colony Drive, Unit 1904
	Naples, FL. 34108
MGR	Stuart Kaye
	163 Edgemere Way
	South Naples, Fl. 34105
ARTICLE V: Effective date, if other than the date	e of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 90 days a
the date of filing.) Note: If the date inserted in this block does not the document's effective date on the Department	meet the applicable statutory filing requirements, this date will not be list to State's records
the date of filing.) Note: If the date inserted in this block does not the document's effective date on the Department	meet the applicable statutory filing requirements, this date will not be list to State's records
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the date of filing.) Note: If the date inserted in this block does not the document's effective date on the Department	meet the applicable statutory filing requirements, this date will not be list of State's records

Page 2 of 2

Typed or printed name of signee

Elling Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

5 30.00 Certified Copy (Optional).

\$.5.00 Certificate of Status (Optional)