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arecchio@foley.com Email Address:_

FLORIDA LIMITED LIABILITY CO.

PK81-Rose, LLC

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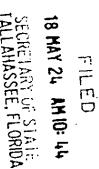
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ARTICLES OF ORGANIZATION

OF

PK81-ROSE, LLC



- 1. Name. The name of this limited liability company is PK81-ROSE, LLC (the "Company"), and it shall be formed as a limited liability company under Chapter 605 of the laws of the State of Florida.
 - 2. Duration. The Company's existence shall be perpetual.
- 3. Purpose. The Company is organized for the purpose of transacting all lawful activities and businesses that may be conducted by a limited liability company under the laws of Florida.
- 4. Place of Principal Office. The street address of the Company's principal office is 16150 Sunset Pines Circle, Boca Grande, Florida 33921.
 - 5. Mailing address. The mailing address of the Company is:

P.O. Box 1841 Boca Grande, Florida 33924.

- 6. Registered Agent and Office. The name of the initial registered agent of the Company is F & L Corp. The street address of the initial registered agent of the Company is One Independent Drive, Suite 1300, Jacksonville, Florida 32202.
- 7. Management of the Company. The management of the Company shall be vested in the managers of the Company. The initial manager of the Company is as follows:

Name

Address

Kathleen Kessel

Post Office Box 44847 Madison, Wisconsin 53744

8. Operating Agreement. The members shall have the power to adopt; alter, amend, or repeal the Operating Agreement of the Company containing provisions for the regulation and management of the affairs of the Company.

The undersigned executed these Articles of Organization on the 24th day of May, 2018.

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

OLIN GESHIVERS

Authorized Representative of Member

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ACCEPTANCE BY REGISTERED AGENT

Having been named Registered Agent and designated to accept service of process for the within-named Company, at the place designated herein, and being familiar with the obligations of that position, I hereby agree to act in this capacity; and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

F &: L.CORP

Olin G. Shivers, Authorized Officer

Dated: May 24, 2018

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SECRETARY OF STATE
TALLAHASSEF FLORID

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