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July 3, 2018

Corporate Record Bureau  
Division of Corporations  
Department of State  
P. O. Box 6327  
Tallahassee, Florida 32301

Reference: **COCONUT HOLDINGS, LLC**

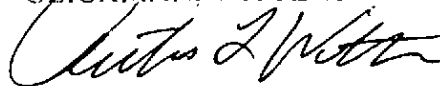
Gentlemen:

We are enclosing one original and a duplicate copy of the Articles of Organization for the above referenced proposed company together with a Designation of Registered Agent and Acceptance of Designation. The duplicate copy of the Articles has been subscribed and acknowledged by the subscriber in the same manner as the original.

Please endorse your approval of the Articles of Organization on the duplicate copy, certify and return it to us. Enclosed is our check in the amount of \$125.00 for the filing of these documents.

Sincerely,

GLICKMAN, WITTERS & MARELL, P. A.



Curtis L. Witters

CLW

Enclosures (as noted above)

**FILED**

**ARTICLES OF ORGANIZATION**

**2018 JUL -9 AM 11:01**

**OF**

**SECRETARY OF STATE  
TALLAHASSEE, FL**

**COCONUT HOLDINGS, LLC**

The undersigned authorized representative hereby forms a limited liability company under the laws of the State of Florida:

ARTICLE I

COMPANY NAME

The name of this company is: COCONUT HOLDINGS, LLC.

ARTICLE II

COMMENCEMENT

The existence of the Company shall commence on July 3, 2018, the date of signing hereof, provided that same shall be filed with the Florida Secretary of State within the time authorized by Statute.

ARTICLE III

MAILING ADDRESS AND STREET ADDRESS OF THE COMPANY

The mailing address and the street address of the principal office of the limited liability company is 1373 N. Killian Drive, Lake Park, FL 33304.

ARTICLE IV

REGISTERED AGENT AND REGISTERED AGENT'S ADDRESS

The Registered Agent and the street address of the Registered Agent of this Company in the State of Florida shall be: Curtis L. Witters, Glickman, Witters & Marell, P.A., 1601 Forum Place, Suite 1101, West Palm Beach, FL 33401.

**FILED**

**2018 JUL -9 AM 11:01**

**SECRETARY OF STATE  
TALLAHASSEE, FL**

ARTICLE V

INITIAL MANAGER

The Initial Manager of the Company shall be: Norman R. Sayre, 1373 N. Killian Drive, Lake Park, FL 33404.

The Initial Manager shall be responsible for the management of the Company, and shall have the full right, power and authority to manage, direct and control all of the business and affairs of the company and to transact business on its behalf, including the authority to execute any instrument transferring, encumbering or in any way involving real property related to the Company.

Notwithstanding the foregoing, the Manager shall have the absolute authority to subcontract any management functions of the Company in his sole and absolute discretion.

ARTICLE VI

DISSOLUTION

The death, retirement, resignation, expulsion, bankruptcy or dissolution of a member shall not dissolve the Company as long as there remains in existence one (1) member. The Company shall dissolve only as provided in the Operating Agreement of the Company or pursuant to Florida Statutes Chapter 605.

ARTICLE VII

RIGHTS, LIABILITIES AND OBLIGATIONS OF MEMBERS

7.1 Liability of Members: No Member shall be personally liable for the expenses, liabilities, debts or obligations of the Company, unless otherwise provided pursuant to Florida Statutes Chapter 605.

7.2 Return of Capital: No Member shall have the right to demand the return of their contribution to capital except as provided in the Company's Operating Agreement then in existence.

7.3 Non-Assignability of Membership Interest:

a) No Member may assign his or her Company interest in whole or in part without the express written consent of 100% of the Company's members, including the member attempting to assign his or her interest.

b) The assignee of a member's interest shall have no right to participate in the management of the business and affairs of the Company:

i) without the express written consent of 100% of the members of the limited liability company including the member assigning the limited liability interest, and

ii) as provided in the Operating Agreement, and

iii) in compliance with any procedure provided for in the Operating Agreement.

c) No interest of any member shall be subject to forced assignment by any court of law.

IN WITNESS WHEREOF, the undersigned Authorized Representative has executed the Articles of Organization, this 3<sup>rd</sup> day of July, 2012 and affirms that the Company has at least one member as of the effective date of these Articles.

  
Curtis L. Witters, Authorized Representative

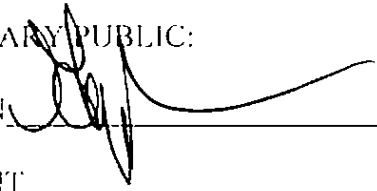
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**2018 JUL -9 AM 11:01  
SECRETARY OF STATE  
TALLAHASSEE, FL**

STATE OF FLORIDA                   |  
  | ss:  
COUNTY OF PALM BEACH        |

The foregoing instrument was acknowledged before me this 3<sup>rd</sup> of July, 2018, by Curtis L. Witters, Authorized Representative of the afore-described Limited Liability Company, who is personally known to me and did not take an oath.

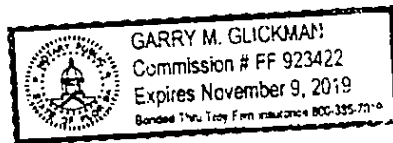
NOTARY PUBLIC:

SIGN:  \_\_\_\_\_

PRINT \_\_\_\_\_

STATE OF FLORIDA AT LARGE (SEAL)

MY COMMISSION EXPIRES:



**FILED**  
**2018 JUL -9 AM 11:01**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FL**

**CERTIFICATE DESIGNATING PLACE OF BUSINESS FOR SERVICE OF PROCESS  
WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED**

NORMAN R. SAYRE, desiring to organize as a Limited Liability Company under the laws of the State of Florida with its principal office as indicated in the Articles of Organization, has named CURTIS L. WITTERS, having an address at GLICKMAN, WITTERS & MARELL, P.A., 1601 Forum Place, Suite 1101, West Palm Beach, FL 33401, as its agent to accept Service of Process within this State.

**ACKNOWLEDGMENT**

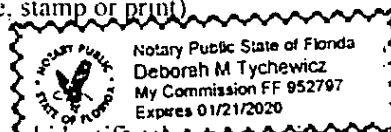
Having been named to accept Service of Process for the above named Limited Liability Company, at the place designated in this Certificate, I hereby agree to act in this capacity, accept the appointment, and agree to comply with the provisions of the Florida Statutes relative to keeping open said office.

  
NORMAN R. SAYRE

SWORN TO AND SUBSCRIBED before me this 3 day of July 2018.

  
NOTARY PUBLIC - STATE OF FLORIDA

Name: DEBORAH M Tychevicz  
(Type, stamp or print)



Personally known or produced identification. If produced identify the type of identification produced:

\_\_\_\_\_

**FILED**  
**2018 JUL -9 AM 11:01**  
**SECRETARY OF STATE**  
**TALLAHASSEE, FL**