L1800187102

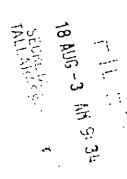
(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						

Office Use Only

M. MOON AUG 0 6 2018



700315500267



NIG -3 MIO: 55



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: 120000000088

Date:	8/3/2018		ACCOUNT. 120000000000
Name:	Chris Vick	-	
Reference #:	N457367		75. 18
Entity Name:	MCM HII	BISCUS, LLC	
		zation to Transact Busines	18 AUG - 3 IAN SI SI
Amendme	ent		9
Change of	f Agent		ž.
Reinstater	ment		
Conversion	งก ·		
Merger			
Dissolution	n/Withdrawal		ã s .
Fictitous N	Name		76 4 U6 −3
Other		- N	
			#110:5 5
Authorized Ar	mount:		
Signature:			

@ CORPORATE HQ

COGENCY GLOBAL INC. 10 E 4011 ST, 10 1 FL NY, NY 10016 800.271.0102 -1.212.947.7200 **PEUROPEAN HQ**

COGENCY GLOBAL (UK) DIMITED REG STEED HENGLAND & WALES REG STRY GROUPTZ 6 BEVIS MARKS, PIFE LONDON EC3A PAA •44 (0)20.3786.1090 @ ASIA PACIFIC HQ

COGENCY GLOBAL (HK) LIMITED A HONG KONG LIMITED COMFANY INFINITUS PLAZA, 12" FL 199 DES VOEUX RD CENTRAL HONG KONG 4852.3975.1803



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

ARTICLES OF ORGANIZATION FOR FLORIDALIMITED LIABILITY COMPANY

ARTICLE I - Name:				
The name of the Limited Liability	Company is:			
MCM Hibiscus, LLC				_
(Must conta	in the words "Limited	l Liability Com	pany, "L.IC.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and street ad	dress of the principal	office of the L	imited Liability Company is:	
			26.00	
Princips	l Office Address:		Mailing Address:	
c/o Morning Calm Management, LLC			c/o Morning Calm Management, LLC	
301 Yamato Road, Suite 4160			301 Yamato Road, Suite 4160	
Boca Raton, FL 3343	1		Boca Raton, FL 33431	$\stackrel{\sim}{\sim}$
			7.7	Ö 😕 🐣
ARTICLE III - Registered Age	nt, Registered Office	& Registered	d Agent's Signature:	? G -
			gent. You must designate an individual or	
another business entity with an a	ctive Florida registrati	ion.)		Č.
The name and the Florida street a	ddress of the registere	ed agent are:		18 AUG -3 NA 9: 2
The famile and allo Florida survey				اب
	Mukang Cho			د. د د
		Name		
	301 Yamato Road,	Suite 4160		
	Florida street addre		KOT acceptable)	
	Boca Raton	FL	33431	
	City	State	Zip	
	<i>□1.</i> ;	2414	 r	
Having been named as registered a	gent and to accept ser	vice of process	for the above stated limited liability company	at the
place designated in this certificate,	I hereby accept the ap	pointment as re	gistered agent and agree to act in this capaci	ty. I
further agree to comply with the pr	ovisions of all statutes	relating to the	proper and complete performance of my dutie	s, and I
am familiar with and accept the ob-	igations of my position	n as registered	agent as provided for in Chapter 605, F.S	
		/	1	
	Regi	stered Agent's	Signature (REQUIRED)	
			<u> </u>	
		(CONTIN	UED)	

		Name and Address:	
<u>Title:</u> "AMBR" = Authorized	Member	-	
"MGR" = Manager			
MGR		Mukang Cho	
	_	301 Yamato Road, Suite 4160	
		Boca Raton, FL 33431	
<u> </u>	_		
		70 0	Ø
		- 100mm - 10	بعثير
	_	工	رى
			1
		7 T	18 EU 10
		·	•
	-		
(Use attachment if nece	essary)		
(Use attachment if necessary)	• -		
CLEV: Effective date, if	other than the date of filing:	(OPTIONAL)	
CLEV: Effective date, if effective date, if	other than the date of filing:		
CLEV: Effective date, if effective date, if effective date is listed, the effective filling.)	other than the date of filing; e date must be specific and	(OPTIONAL) I cannot be more than five business days prior to or 90 d	lays
CLEV: Effective date, if offective date is listed, the of filling.) If the date inserted in this	other than the date of filing: c date must be specific and s block does not meet the a	(OPTIONAL) I cannot be more than five business days prior to or 90 depolicable statutory filing requirements, this date will not be	lays
CLEV: Effective date, if offective date is listed, the of filling.) If the date inserted in this	other than the date of filing; e date must be specific and	(OPTIONAL) I cannot be more than five business days prior to or 90 depolicable statutory filing requirements, this date will not be	lays
CLEV: Effective date, if of effective date is listed, the effiling.) If the date inserted in this cument's effective date or	other than the date of filing: e date must be specific and s block does not meet the a the Department of State's	(OPTIONAL) I cannot be more than five business days prior to or 90 depolicable statutory filing requirements, this date will not be	lays
CLEV: Effective date, if of effective date is listed, the le of filing.) If the date inserted in this cument's effective date or	other than the date of filing: e date must be specific and s block does not meet the a the Department of State's	(OPTIONAL) I cannot be more than five business days prior to or 90 depolicable statutory filing requirements, this date will not be	lays
CLEV: Effective date, if of effective date is listed, the effiling.) If the date inserted in this cument's effective date or	other than the date of filing: e date must be specific and s block does not meet the a the Department of State's	(OPTIONAL) I cannot be more than five business days prior to or 90 depolicable statutory filing requirements, this date will not be	lays
CLEV: Effective date, if of effective date is listed, the le of filing.) If the date inserted in this cument's effective date or	other than the date of filing: e date must be specific and s block does not meet the a the Department of State's	(OPTIONAL) I cannot be more than five business days prior to or 90 depolicable statutory filing requirements, this date will not be	lays
CLEV: Effective date, if of effective date is listed, the effiling.) If the date inserted in this cument's effective date or	other than the date of filing: e date must be specific and s block does not meet the a the Department of State's	(OPTIONAL) I cannot be more than five business days prior to or 90 depolicable statutory filing requirements, this date will not be	lays
CLEV: Effective date, if of effective date is listed, the effiling.) If the date inserted in this cument's effective date or	other than the date of filing: e date must be specific and s block does not meet the a the Department of State's if any.	(OPTIONAL) I cannot be more than five business days prior to or 90 depolicable statutory filing requirements, this date will not be	lays
CLEV: Effective date, if offective date is listed, the e of filing.) If the date inserted in this cument's effective date of CLEVI: Other provisions,	other than the date of filing: e date must be specific and s block does not meet the a the Department of State's if any.	(OPTIONAL) I cannot be more than five business days prior to or 90 depolicable statutory filing requirements, this date will not be	lays
CLE V: Effective date, if offective date is listed, the of filing.) If the date inserted in this cument's effective date of CLE VI: Other provisions, REQUIRED SIGNAT	other than the date of filing: e date must be specific and s block does not meet the a the Department of State's if any.	(OPTIONAL) I cannot be more than five business days prior to or 90	lays
CLE V: Effective date, if offective date is listed, the of filing.) If the date inserted in this cument's effective date of CLE VI: Other provisions, REQUIRED SIGNAT	other than the date of filing: e date must be specific and s block does not meet the a the Department of State's if any. FURE:	(OPTIONAL) I cannot be more than five business days prior to or 90 deppticable statutory filing requirements, this date will not be records. an authorized representative of a member.	lays
CLE V: Effective date, if effective date is listed, the se of filing.) If the date inserted in this cument's effective date of CLE VI: Other provisions, REQUIRED SIGNATIONS of This description of the second sec	other than the date of filing: e date must be specific and s block does not meet the a the Department of State's if any. FURE: Signature of a member or occument is executed in according	generative of a member. an authorized representative of a member. cordance with section 605.0203 (1) (b), Florida Statutes.	lays
CLE V: Effective date, if effective date is listed, the se of filing.) If the date inserted in this cument's effective date of CLE VI: Other provisions, REQUIRED SIGNATION of I am a	other than the date of filing: the date must be specific and the block does not meet the a the Department of State's if any. FURE: Signature of a member or ocument is executed in account that any false informations.	an authorized representative of a member. Fordance with section 605.0203 (1) (b), Florida Statutes. tion submitted in a document to the Department of State	lays
CLE V: Effective date, if effective date is listed, the effective date is listed, the te of filing.) If the date inserted in this cument's effective date of CLE VI: Other provisions, REQUIRED SIGNATION of I am a	other than the date of filing: the date must be specific and the block does not meet the a the Department of State's if any. FURE: Signature of a member or ocument is executed in account that any false informations.	generative of a member. an authorized representative of a member. cordance with section 605.0203 (1) (b), Florida Statutes.	lays

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

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)

ARTICLE IV-