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|---------------------|-------------------------|--------------|
| - | (Requestor's Name) | |
| | (Address) | |
| | (Address) | |
| | (City/State/Zip/Phone # | |
| PICK-UI | P WAIT | MAIL |
| | (Business Entity Name | *) |
| | | |
| | (Document Number) | |
| Certified Copies | Certificates o | of Status |
| Special Instruction | s to Filing Officer: | |
| - F 22/5: | - ··· ····· | |
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Individual to Carteria

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COVER LETTER

| | New Filing Section Division of Corporations | | | | |
|-------------|---|----------------|--|-------------------------|--------------|
| cupiec | GOLDMAN DEVELOPMENT AND | DESIGN L | LC | | |
| SUBJEC | Name of Lim | iited Liabilii | y Company | _ | |
| The enclo | osed Articles of Organization and fee(s) are | : submitted (| for filing. | | |
| Please ret | urn all correspondence concerning this ma | tter to the fo | llowing: | | |
| | TANIA PERERA | | | | |
| | | Name of I | erson | | _ |
| | CONFIDENTIAL ACCOUNTING | | | ₹' | |
| | | Firm/Con | npany | - 26 - 50 | 18 ¥ |
| | 6140N US HIGHWAY 41 | | | が続ける。 | (E) |
| | | Addre | ss | | - - - |
| | APOLLO BEACH, FL 33572 | | | _ | PH 1: 43 |
| | Ci MAIL@CONFIDENTIALACCOUNTIN | ity/State and | • | _ | - ت |
| | E-mail address: (to be used | for future ar | nnual report notification) | | - |
| For further | information concerning this matter, please | call: | | | |
| | TANIA PERERA 81 | | 641-3603 | | |
| | | | Daytime Telephone Number | _ | |
| Enclosed | is a check for the following amount: | | | | |
| | Filing Fee \$\bigs\\$130.00 Filing Fee & Certificate of Status | Certifie | b Filing Fee & S160.00 F d Copy Certificate l copy is enclosed) Certified (additional c | e of Status Copy | |
| | Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 |] | Street Address New Filing Section Division of Corporations Clifton Building 1661 Executive Center Circle Fallahassee, FL 32301 | | |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

| | VELOPMENT AND DESIG | | | | | |
|--|---|--|------------------------------|--|---------------|---|
| (Must | contain the words "Limited Li | ability Company, "L. | .L.C.," or "LLC.") | | | |
| ARTICLE II - Address: | | | -Lillian Common in | | | |
| The mailing address and stre | eet address of the principal off | ice of the Limited Li | ability Company is: | | | |
| <u>Pri</u> | ncipal Office Address: | | Mailing Address: | | | |
| 9915 SMARTY | JONES DRIVE | | | | | |
| RUSKIN, FL 33 | 573 | | | | | |
| 110011111111111111111111111111111111111 | | | | | | |
| | | | | | | |
| | Agent, Registered Office, & | Registered Agent's | s Signature: | | | |
| ARTICLE III - Registered | Agent, Registered Office, & pany cannot serve as its own R | tegistered Agent. You | | al o∰ ∽ | = | |
| ARTICLE III - Registered | | tegistered Agent. You | | nal o[사] | 18 A | |
| ARTICLE III - Registered (The Limited Liability Com another business entity with | pany cannot serve as its own R an active Florida registration. | tegistered Agent. You .) | | SECRE | 18 AUG | |
| ARTICLE III - Registered (The Limited Liability Com another business entity with | pany cannot serve as its own R | tegistered Agent. You .) | | SECRETA | 18 AUG | |
| ARTICLE III - Registered (The Limited Liability Com another business entity with | pany cannot serve as its own R an active Florida registration. | tegistered Agent. You .) agent are: | | nal of 1 Policy Control of the SECULO 1. | 18 AUG - 7 | • |
| ARTICLE III - Registered (The Limited Liability Com another business entity with | pany cannot serve as its own R i an active Florida registration. reet address of the registered a | tegistered Agent. You .) agent are: | | SECRETE: | 18 AUG - 7 PM | • |
| ARTICLE III - Registered (The Limited Liability Com another business entity with | pany cannot serve as its own R i an active Florida registration. reet address of the registered a NISHANTHA PERER | tegistered Agent. You legent are: LA Name | | SECULT : | PM I: | • |
| ARTICLE III - Registered (The Limited Liability Com another business entity with | pany cannot serve as its own R i an active Florida registration. reet address of the registered a NISHANTHA PERER 6140N US HIGHWAY | tegistered Agent. You legent are: LA Name | u must designate an individu | Constitution of the consti | PM III | ٠ |
| ARTICLE III - Registered (The Limited Liability Com another business entity with | pany cannot serve as its own R i an active Florida registration. reet address of the registered a NISHANTHA PERER 6140N US HIGHWAY Florida street address (| tegistered Agent. You agent are: A Name ('41 (P.O. Box NOT acce | u must designate an individu | Constitution of the consti | PM I: | |
| ARTICLE III - Registered (The Limited Liability Com another business entity with | pany cannot serve as its own R i an active Florida registration. reet address of the registered a NISHANTHA PERER 6140N US HIGHWAY | tegistered Agent. You legent are: LA Name | u must designate an individu | Constitution of the consti | PM III | ٠ |

H pi further agree to comply with the provisions of all statutes relating to the proper and complete performance of my au am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager KEVIN D HUGHES-STOWE <u>AMBR</u> 9915 SMARTY JONES DRIVE RUSKIN, FL 33573 MID-ASAD YUSUPOV **AMBR** 112N, 12TH STREET, APT 2214 TAMPA, FL 33602

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 8/7/2018

__. (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

ANY OR ALL LAWFUL BUSINESS

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any 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.

NISHANTHA PERERA

Typed or printed name of signee

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)