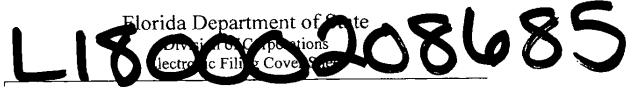
08/31/2018 09:35 FAX Division of Corporations



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To:

Division of Corporations

Fax Number : (850) 617-6331

From:

Account Name : SHUTTS & BOWEN LLP (ORLANDO)

Account Number : I20030000004 Phone : (407)835-6769 : (407)843-4076 Fax Number

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

Email(A)ddress: corpmail@shutts.com FLORIDA LIMITED LIABILITY CO. AMERICAN SORRENTO INVESTMENTS, LLC Certificate of Status 0 0 Certified Copy 02 Page Count \$125.00 Estimated Charge

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K. Brumbley

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is:

AMERICAN SORRENTO INVESTMENTS, LLC

ARTICLE II - Street Address

The street address of the principal office of the Limited Liability Company is as follows:

3911 Orange Lake Drive Orlando, Florida 32817

ARTICLE III - Mailing Address

The mailing address of the principal office of the Limited Liability Company is as follows:

3911 Orange Lake Drive Orlando, Florida 32817

ARTICLE IV - Management

The Company shall be managed by one or more managers, and is thus a manager-managed limited liability company. The initial manager shall be Robert Zlatkiss.

ARTICLE V - Registered Agent and Office and Registered Agent's Signature

The name and the Florida street address of the registered agent are:

Robert Zlatkiss 3911 Orange Lake Drive Orlando, Florida 32817

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this Certificate. I hereby 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, Florida Statutes.

Robert Blatkiss

(Registered Agent's Signature) Robert Zlatkiss

Robert Blatkiss

Signature of a member or an authorized representative of a member Robert Zlatkiss, Authorized Representative

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