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(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Na	me)
(Do	ocument Number))
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
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	Office Use Or	



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CORPORATE ACCESS,

When you need ACCESS to the world

INC.

236 East 6th Avenue, Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

			W	ALK IN		
		PICK	UP:	2/27 LAUREN		
	хх	CERTIFIED COPY				
		РНОТОСОРУ				
		CUS				
	хх	FILING	LLC			
1.		JEN FLORIDA 36, LLC (CORPORATE NAME AND DOCUM	ENT#)			
 3. 		(CORPORATE NAME AND DOCUM	ENT#)	File	1st	
4.		(CORPORATE NAME AND DOCUM (CORPORATE NAME AND DOCUM			-	
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SPE	ECIA	L INSTRUCTIONS:	EIN I # J			

COVER LETTER

TO:	New Filing Section Division of Corporations			
SUBJEC	JEN Florida 36, LLC			
W Batx	·	Limited Liabi	ity Company	
The enclo	osed Articles of Organization and fee(s	i) are submittec	I for filing.	
Please re	turn all correspondence concerning this	s matter to the	following:	
	Kristy Horan			
		Name of	Person	
	Godbold, Downing, Bill & Rentz, I	² .A.		
		Firm/Co	mpany	
	222 W. Comstock Avenue, Suite H)1		
		Addr	ess	
	Winter Park, FL 32789			
	khoran@gdb-law.com	City/State an	d Zip Code	
	E-mail address: (to be us	sed for future a	nnual report notification	on)
For further	information concerning this matter, ple	rase call:		
	Kristy Horan	407	647-4418	
	Name of Person	Arca Code	Daytime Telephone	Number
Enclosed i	s a check for the following amount:			
\$125.00 F	iling Fee \$130.00 Filing Fee & Certificate of Status	Certific	D Filing Fee & d Copy l copy is enclosed)	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	1 (2	Street Address New Filing Section Division of Corporatio Clifton Building 1661 Executive Center Tallahassee, FL 32301	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

liability Company, "L.L.C.," or "LLC.")
fice of the Limited Liability Company is:
Mailing Address:
1750 W. Broadway
Suite 111
Oviedo, FL 32765

| 1750 W. Broadway, Suite 111 |
| Florida street address (P.O. Box NOT acceptable) |
| Ovicdo | FL | 32765 |
| City | State | Zip

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 finither 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, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

19 FEB 27 AM ID: 13

	Title: "AMBR" - Authorized Mc "MGR" = Manager	Mame and Address; mber
	MGR	HWTC Investors LLC
		680 Fifth Avenuc, 25th Floor
		New York, NY 10019
	(Use attachment if necessar	
		e)
ARTICL (If an eff the date (<u>Note:</u> It	EV: Effective date, if other ective date is listed, the date of filing.) The date inserted in this block	than the date of filing:
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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)



Signature Page To Articles of Organization

HWTC Investors LLC, a Delaware limited fiability company

By: JEN 6 VA LLC, a Delaware limited liability company, co-manager

By: Cruze Signor

By: Cruze Signor

By: Cruze Signor

By: Cruze Signor

And

By: HWTC Co-Invest LP, a Delaware limited partnership, co-manager

By: JEN 6 GP LLC, a Delaware limited fiability company, general partner

By:
Name: Ethan Leibowitz
Its: Authorized Signor

ECRETARY OF STAFE

FEB 27 AN IO: I