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To:

Division of Corporations

Fax Number

: (850)617-6381

From:

Account Name : PAUL S. MARTIN & ASSOCIATES, P.A.

Account Number : 120000000187 : (954)923-4664 Phone Fax Number : (954)923-6545

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

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# FLORIDA LIMITED LIABILITY CO. POMPANO SECOND CHANCE, LLC

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## ARTICLES OF ORGANIZATION

## FOR

## POMPANO SECOND CHANCE, LLC

## **ARTICLE I**

## NAME

The name of the Florida Limited Liability Company is Pompano Second Chance, LLC.

## **ARTICLE II**

## COMPANY BUSINESS & MAILING ADDRESS

The mailing address and street address of the company is: 990 Paradise Road, Swampscott, Massachusetts 01901.

## ARTICLE-III

## NUMBER OF UNITS

The company is authorized to issue one thousand (1000) units.

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## **ARTICLE IV**

## INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The street address of the initial registered office of the company is 2134 Hollywood Boulevard, Hollywood, FL 33020, and the name of the initial registered agent of the company at that office is Paul S. Martin.

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# ARTICLE V

## **INDEMNIFICATION**

The company shall indemnify any authorized representative, officer, or director or any former officer or director to the full extent permitted by law.

## **ARTICLE VI**

## MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager-managed company. The name and address of each initial manager is:

Stuart Levey, manager, 64 Newton Street, Brookline, MA 02445. 1.

IN WITNESS WHEREOF, the undersigned member or authorized representative of member has executed these articles of organization this \_\_\_\_\_Z1 5 fday of March, 2019.

Paul S. Martin, as authorized representative

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## ACKNOWLEDGMENT OF REGISTERED AGENT:

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated above 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 statutes relating to the proper and complete performance of my duties, and am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, Florida Statutes.

Paul S. Martin Registered Agent

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