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**FLORIDA LIMITED LIABILITY CO.  
RANCHO RELAXO OF GLADES COUNTY, LLC.**

Certificate of Status	1
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MAR 27 2019

C. Kinser

## ARTICLES OF ORGANIZATION

### ARTICLE I:

The name of this Florida limited liability company is: Rancho Relaxo of Glades County, LLC.

### ARTICLE II:

The mailing address and the street address of the principal office of the limited liability company is: 25545 SW 140 Ave. Princeton, FL 33032.

### ARTICLE III:

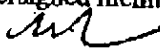
The name and Florida Street address of the limited liability company's registered agent:

Name:	Arthur F. McCormick, Esq.
Florida Street Address:	7550 S.W. 57 <sup>th</sup> Ave., Suite 203
City, State & Zip:	South Miami, Florida 33143

### ARTICLE IV:

No members shall have the right to assign their membership interests in the Company without the written agreement of all of the membership interests, unless otherwise provided in the Company's Operating Agreement. If the assignment is not approved by all of the membership interests, the assignee shall have no right to become a member, to participate in the management of the Company, or to exercise any other rights or powers of a member. The assignee shall merely be entitled to receive the share of profits and other distributions and the allocation of income, gain, loss deduction, credit or similar item to which the assignor was entitled, to the extent assigned. The management of the limited liability company is reserved for the members.

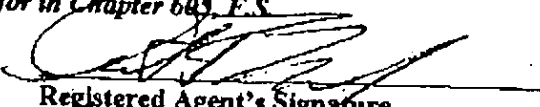
The undersigned member executed these Articles of Organization on March 25, 2019.

  
BY: Ralph Montalvo

In accordance with section 605, Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

  
Ralph Montalvo

*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 603, F.S.*

  
Registered Agent's Signature

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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