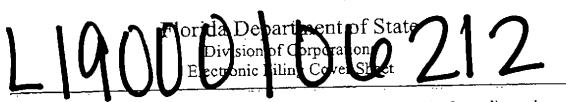
4/25/2019



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FLORIDA LIMITED LIABILITY CO. BWW MANAGEMENT, LLC

18.25 PH I2: 24 하는 기계:

Certificate of Status	0
Certified Copy	1
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M SIMMONS

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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The name of the Limited Liability Company is:

BWW MANAGEMENT, LLC.

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

142 WEST PLATT STREET

TAMPA, FLORIDA 33606

PO BOX 458 TAMPA, PLORIDA 33601

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Venerable Law, LLP

Name

315 S. PLANT AVENUE

Florida street address (P.O. Box NOT acceptable)

TAMPA FLORIDA 33606
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 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. F.S..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

19 APR 25 PM 4: 54

"AMBR" = Authorized Member	Name and Address:
"MGR" = Manager MGR	DONALD E. PHILLIPS 142 WEST PLATT STREET
	TAMPA, FLORIDA 33606
(Use attachment if necessary)	
(If an effective date is listed, the date mus	the date of filing: (OPTIONAL) It be specific and cannot be more than five business days prior to or 90 days after
the date of filing.)	es not meet the applicable statutory filing requirements, this date will not be listed runent of State's records.
Note: If the date inserted in this block do the document's effective date on the Depa	
Note: If the date inserted in this block do the document's effective date on the Depa ARTICLEVI: Other provisions, if any.	
the document's effective date on the Depa	

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.

DONALD E. PHILLIPS

Typed or printed name of signee

Fifing 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)