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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500

ACCOUNT NO. : I2000000195			
REFERENCE: 852168 7295821			
AUTHORIZATION: Some Series			
COST LIMIT : \$ 125.00'			
	. – – – -	· • • • -	
ORDER DATE : July 19, 2019			
ORDER TIME : 12:41 PM			
ORDER NO. : 852168-005			
CUSTOMER NO: 7295821			
	. 		
DOMESTIC FILING			
NAME: EAST HILL VIVIENDO, LLC			
EFFECTIVE DATE:	3.57	20	
	;	<u> </u>	
ARTICLES OF INCORPORATION	: E.		٠.
CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION	<u>.</u>	S	•
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PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:		<i>ن</i> خ	. :
CERTIFIED COPY	; . ·	ن 2	
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CONTACT PERSON: Amanda Robinson - EXT.			
EXAMINER'S INITIALS: _			_

COVER LETTER

	ew Filing Section ivision of Corporations
SUBJECT	East Hill Viviendo, LLC
3000001	Name of Limited Liability Company
The enclose	ed Articles of Organization and fee(s) are submitted for filing.
Please retui	n all correspondence concerning this matter to the following:
	Braden K. Ball, Jr.
	Name of Person
	Litvak, Beasley, Wilson & Ball, LLP
	Firm/Company
	40 Palafox Place, Suite 300
	Address
	Pensacola, FL 32502
ŀ	City/State and Zip Code
<u></u>	E-mail address: (to be used for future annual report notification)
For further in	formation concerning this matter, please call:
	Braden K. Ball, Jr. 850 432-9818
•	Name of Person Area Code Daytime Telephone Number
Enclosed is	a check for the following amount:
\$ 125.00 Fil	ing Fee \$\int_{\text{S130.00 Filing Fee & Certificate of Status}} \begin{array}{c} \$\scale=\s
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

East Hill Viviendo	· ····································	·	
(Mu	st contain the words "Limited Liab	iity Company, "L.L.C.,"	or "LLC.")
TICLE II - Address:			
mailing address and s	treet address of the principal office	of the Limited Liability C	Company is:
<u>P</u>	rincipal Office Address:		Malling Address:
4165 Montaly	0	4165 Montalvo	
Pensacola, FL CICLE III - Registere Limited Liability Conter business entity with	ed Agent, Registered Office, & R impany cannot serve as its own Regith an active Florida registration.)	Pensacola, PL gistered Agent's Signat	32504 ure:
Pensacola, FL FICLE III - Registere Limited Liability Col her business entity wi	ed Agent, Registered Office, & R mpany cannot serve as its own Reg ith an active Florida registration.) street address of the registered age	Pensacola, PL gistered Agent's Signat	32504 ure:
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(CONTINUED)

Registered Agent's Signature (REQUIRED)

<u>Titlo:</u> "AMBR" = Authorized Momber	Nume and Address:
"AMBR" = Authorized Member "MGR" = Managor	
AMBR	Sanjiv Kapur
	4165 Montalvo
	Pensacola, PL 32504
MDD Manulan	T D 1 1/00
MBR -Member	Josse Brodeur, MBR 4300 Bayou Blvd., Suite 35
	Pensacola, PL 32503
	1 endedted 2 2 0 20 00
(Use attachment if necessary)	
	F- F
REQUIRED SIGNATURE:	Softan'
Signature of a member This document is executed in I am aware that any false info	er or an authorized representative of a member. in accordance with section 605.0203 (1) (b), Florida Statutes, formation submitted in a document to the Department of State ony as provided for in s.817.155, F.S.
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