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## Sunshine State Corporate Compliance Company

## 3458 Lakeshore Drive, Tallahassee, Florida 32312 (850) 656-4724

DATE 9/26/2019	<u>9</u>
	₩ALK IN
ENTITY NAME	LONDON MYRTLES CO-INVEST LLC
DOCUMENT NU	JMBER
	**PLEASE FILE THE ATTACHED AND RETURN**
xxxxxx	Plain Copy
	Certified Copy
	Certificate of Status
	**PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**
	Certified Copy of Arts & Amendments
	Certificate of Good Standing
	Cert. Copy of Restated Arts & Amends if available. If not provide Cert. Copy of Arts & Amends.
	**APOSTILLE' / NOTARIAL CERTIFICATION**
COUNTRY OF DE	ESTINATION
NUMBER OF CEN	RTIFICATES REQUESTED
TOTAL OWED	\$125.00 <b>CHECK</b> # 6636
Please call Ti	ina at the above number for any issues or concerns. Thank you so much!

### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:
The name of the Limited Liability Company is:
London Murtles Co-Invest LLC

London Myrtles Co-Invest 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:

701 Brickell, Suite 1490	701 Brickell, Suite 1490
Miami, FL 33131	Miami, FL 33131

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:

NRAI Services, Inc.					
	Name				
1200 South Pine Isla	and Road				
Florida street addres	ss (P.O. Box <u>NOT</u> acc	eptable)			
Plantation,	Florida	33324			
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..

NRAI Services, Inc.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

The name and address of each person authorized to manage and control the Limited Liability Company: Title: Name and Address: "AMBR" = Authorized Member "MGR" = Manager London Blackfin LLC AMBR\_ 701 Brickell, Suite 1490 Miami, FL 33131\_\_\_\_ (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. REQUIRED SIGNATURE 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. Benjamin London Typed or printed name of signee Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent 5 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

ARTICLE IV-