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FLORIDA LIMITED LIABILITY CO.
SCOTTISH THISTLE, LLC

Certificate of Status	1
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**ARTICLES OF ORGANIZATION
FOR A FLORIDA LIMITED
LIABILITY COMPANY**

ARTICLE I - Name:

The name of the Limited Liability Company is, SCOTTISH THISTLE, LLC

ARTICLE II - Address:

The mailing and street address of the principal office of the Limited Liability Company is 25354 Marion Avenue, Punta Gorda, Florida 33950. The initial registered agent and address of such agent for the Limited Liability Company is Gary T. Fileman, 201 West Marion Avenue, Suite 1208, Punta Gorda, Florida 33950.

ARTICLE III - Duration:

Unless earlier terminated under the Act or the Operating Agreement, the period of duration of the Company shall be perpetual.

ARTICLE IV - Management:

The managing member(s) of the Limited Liability Company and his/her mailing address are as follows:

Karen L. Harper, 27047 Safe Haven Lane, Punta Gorda, Florida 33983, Managing Member (AMBR)


ARTICLE V - Members Rights to Continue Business:

Any successor or assignee to the interest of member, or the remaining members, if any, of the Limited Liability Company shall have the right to continue the business on the death, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company. If the Limited Liability Company has more than one member at the time of any of the occurrences above, the unanimous consent of all of the remaining members shall be needed to continue the business of the Limited Liability Company.

10 NOV 13 2019
FILEMAN
PUNTA GORDA
FLORIDA

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IN WITNESS WHEREOF, the undersigned member or authorized representative of a member of SCOTTISH THISTLE, LLC has executed these Articles of Organization on the 11 day of November, 2019.



Gary T. Fileman, Esq.

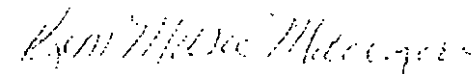
Signature of a member or authorized representative of a member.

(In accordance with section 605.0203(1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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, Florida Statutes)

STATE OF FLORIDA)
)
COUNTY OF CHARLOTTE)

Subscribed and sworn to (or affirmed) before me on the 11 day of November, 2019, by Gary T. Fileman, Esq., who is personally known to me or who has produced _____ as identification.





NOTARY PUBLIC - STATE OF FLORIDA
Print Name: Kim Marie Mauger
Comm. No.: GG 079631

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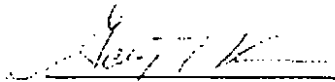
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ACCEPTANCE OF APPOINTMENT

RE: SCOTTISH THISTLE, LLC

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, Florida Statutes.

Dated: 11/13, 2019



Gary T. Fileman, Esq.

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10 NOV 13 AM 11:00
FILED
CLERK OF COURT
JUDICIAL CIRCUIT IN AND FOR
THE NINTH JUDICIAL CIRCUIT
IN FLORIDA
TALLAHASSEE, FLORIDA