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1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE: 071351 AUTHORIZATION : COST LIMIT : \$ 125.00 ORDER DATE: December 2, 2019 ORDER TIME : 2:47 PM ORDER NO. : 071351-005 CUSTOMER NO: 4336482 DOMESTIC FILING NAME: KOZY PARK II LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION \_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

EXAMINER'S INITIALS:

CORPORATION SERVICE COMPANY

CERTIFIED COPY
XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: AMANDA ROBINSON-EXT. 62968

## COVER LETTER

TO:	New Filing Section Division of Corporations					
SUBJE	KOZY PARK II LLC					
SOBJE		of Limited Liabi	lity Company			
The enc	losed Articles of Organization and fe	e(s) are submitted	d for filing.			
Please ro	eturn all correspondence concerning	this matter to the	following:			
	Robyn Tuerk					
	Name of Person					
Philips International						
Firm/Company						
	295 Madison Avenue, 2nd Floor					
	Address					
	New York, New York 10017					
	rtuerk@pihc.com	City/State ar	nd Zip Code			
	E-mail address: (to be	e used for future	annual report notificat	ion)		
For further	r information concerning this matter,	please call:				
	Robyn Tuerk	212 સ (	951-3801			
	Name of Person		Daytime Telephor			
Enclosed	is a check for the following amount:	:				
\$125.00	Filing Fee \$130.00 Filing Fee Certificate of Stat	us LUCertifi	00 Filing Fee & [ ed Copy al copy is enclosed)	\$160.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)		
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Street Address New Filing Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	er Circle		

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE II - Address: The mailing address and stre	contain the words "Limited Liab ect address of the principal office acipal Office Address:			
ne mailing address and stre		of the Limited I	liability Company is:	
<u>Prin</u>		of the Limited I	liability Company is:	
	nainal Office Add			
	icipai Office Address:		Mailing Address:	
295 Madison Avenue, 2nd Floor New York, New York 10017		295 N	295 Madison Avenue, 2nd Floor	
			York, New York 10017	
	eet address of the registered age			
	Corporation Service Co	ompany		
	Corporation Service Co Na 1201 Hays Street	ompany me		
	Corporation Service Co	ompany me	ecptable)	
	Corporation Service Co Na 1201 Hays Street	ompany me	acptable)	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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Title: "AMBR" = Authorized Member	Name and Address:		
"MGR" = Manager			
MGR	Philip Pilevsky		
	295 Madison Avenue, 2nd Floor		
	New York, New York 10017		
MGR	Seth Pilevsky		
	295 Madison Avenue, 2nd Floor		
	New York, New York 10017		
	TON TOIR, HOW TOIR TOOTS		
<u>MGR</u>	Michael Pilevsky		
	295 Madison Avenue, 2nd Floor		
	New York, New York 10017		
MGR	Diana Marrone		
	295 Madison Avenue, 2nd Floor		
	New York, New York 10017		
the date of filing.)	meet the applicable statutory filing requirements, this date will not be listed as of State's records.		
ARTICLE VI: Other provisions, if any.			
This document is execu	ember or an authorized representative of a member. ted in accordance with section 605.0203 (1) (b), Florida Statutes. e information submitted in a document to the Department of State		
constitutes a third degre	e felony as provided for in s.817.155, F.S.		
	Typed or printed name of signee		

The name and address of each person authorized to manage and control the Limited Liability Company:

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)