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1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE: 146675 7977112 AUTHORIZATION : COST LIMIT : \$ 125.00 ORDER DATE: January 20, 2020 ORDER TIME : 9:54 AM ORDER NO. : 146675-010 CUSTOMER NO: 7977112 DOMESTIC FILING NAME: FOXFIRE GROWTH CAPITAL LLC EFFECTIVE DATE: _ ARTICLES OF INCORPORATION __ CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: __ CERTIFIED COPY XX PLAIN STAMPED COPY

EXAMINER'S INITIALS:

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Kadesha Roberson - EXT.

CORPORATION SERVICE COMPANY

COVER LETTER

TO:	New Piling So Division of Co				
SUBJEC		GROWTH CAPITAL L	LC		
SOLUTION	···	Name of L	imited Liabi	lity Company	 -
The encl	osed Articles o	f Organization and fee(s)	are submitted	I for filing.	
Please re	turn all corresp	ondence concerning this i	natter to the	following:	
	Morgan Hi	В			
		-	Name of	Person	
	Woods, We	ideumiller, Micheui & Ri	idnick, LLP		
		···	Firm/Co	трвлу	<u> </u>
	9045 Strada	Stell Court, 4th Floor			
			Addr	cas	
	Naples/FL 3	4109			
	mhila@lawfi	rmnaples.com	City/State an	d Zip Code	
		E-mail address: (to be use	d for future a	nnual report notificat	ion)
For further	information co	ocerning this matter, plea	se call:		
	Morgan Hila	at (239	325-4070	
	Nam		Arca Code	Daytime Telephor	ne Number
Enclosed	is a check for ti	he following amount:			
	0 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certific	i.00 Filing Fee & ad Copy al Copy is enclosed)	E\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		g Address		Street Address	luirian

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

FILED

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liabi	lity Company is:			
FOXFIRE GROW	TH CAPITAL LLC			
	natin the words "Limite	d 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:	
Princi	pal Office Address:		Mailing Address:	
2170 GULF SHOR		ur	GARDAVAGEN 14	
<u>NAPLES, PL 3410</u>	2		JRSHOLM SE 182 67	
	 .	<u>sw</u>	EDEN	
(The Limited Liability Compan another business entity with an The name and the Florida street	active Florida registrat	ion.)	You must desigoate an individua	d or
	WWMR Statutory	Agent LLC		
		Name		
	9045 Strada Stell C	ourt, 4th Floor		
	Florida street addre	ss (P.O. Box NOT a	cceptable)	
	Naples	FL	34109	
	City	State	Zip	
Having been named as registered place designated in this certificate further agree to comply with the plam familiar with and accept the old	. I hereby accept the approvisions of all statutes is ligations of my position	pointment as registere relating to the proper	ed agent and agree to act in this of and complete performance of my or provided for in Chapter 605, F	apacity, I

Title: "AMBR" = "MGR" = 1	Authorized Member lanager	Name and Address:	
MGR		THOMAS KARL A. BERGGREN UTGARDAVAGEN 14 DJURSHOLM SE 182 67 SWEDEN	
MGR		EVA ANN-KRISTIN BERGGREN UTGARDAVAGEN 14 DJURSHOLM SE 182 67 SWEDEN	
			
	nent if necessary)		
EV: Effecti ctive date is f filing.) the date inse	se date, if other than the d listed, the date must be rted in this block does no	late of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90 do of meet the applicable statutory filing requirements, this date will not be	
EV: Effective date in filing.) the date insomet's effect	we date, if other than the d disted, the date must be rted in this block does no ive date on the Departme provisions, if any.	late of filing: specific and cannot be more than five business days prior to or 90 do not meet the applicable statutory filing requirements, this date will not be ent of State's records.	
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EV: Effective date is filing.) the date insoment's effect	se date, if other than the disted, the date must be ried in this block does not ive date on the Department provisions, if any. SIGNATURE: Signature of a This document is exert am aware that any factors.	late of filing: specific and cannot be more than five business days prior to or 90 do not meet the applicable statutory filing requirements, this date will not be ent of State's records.	

ARTICLE IV-

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)