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Account#: 120000000088

Date: June 19, 20	20	
Name: KEN HOWE	ELL	
Reference #: <b>123</b>	33447	
Entity Name:	SARABROOK PRO	OPERTY LLC
✓ Articles of Incorporatio	n/Authorization to Transa	act Business
Amendment		
☐ Change of Agent		ISSUES? CALL
Reinstatement		KEN:
Conversion		518-213-0738
Merger		
☐ Dissolution/Withdrawa	I	
☐ Fictitious Name		
✓ Other	** CERTIFIED COPY	UPON FILING **
Authorized Amount:	\$155.00	
1	<b>4100.00</b>	
Signature:		

## COVER LETTER

TO:	New Filing Se Division of Co				
CHDIN	SaraBrook	R Property LLC			
SOBJE	CT:	Nam	e of Limited Lia	ibility Company	
The encl	losed Articles o	f Organization and f	ce(s) are submit	ted for filing.	
Please re	eturn all corresp	andence concerning	this matter to the	ne following:	
	Angel Aval	os, Jr.			
			Name	of Person	
	Schiff Hard	in LLP			
			Firm	'Company	
	233 South V	Vacker Drive, Suite	7100		
			A	ddress	<del></del>
	Chicago, IL	60606			
			City/State	and Zip Code	
		gschiffhardin.com	1000	1	
		E-mail address: (to	be used for futu	re annual report notificat	ion)
For furthe	r information co	oncerning this matte	r, please cail:		
	Angel Avalo	os, Jr.	312 _at(	258-4564 )	
	Nan	ie of Person	Area Code	Daytime Telephor	ne Number
Enclosed	Lis a check for t	the following amour	nt:		
	00 Filing Fee	□\$130.00 Filing Certificate of Sta	g Fee & 🔳	\$155.00 Filing Fee & tified Copy ional copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	New F Divisi P.O. E	ng Address Filing Section on of Corporations Box 6327 passee, FL 32314		Street Address New Filing Section D The Centre of Tallah 2415 N. Monroe Stre Tallahassee, FL 3230	assee cet, Suite 810

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	LLC		
(Must co	natin the words "Limited Lia	bility Company,	"L.L.C.," or "LLC.")
ARTICLE II - Address:			
The mailing address and street	address of the principal offic	ce of the Limited	Liability Company is:
<u>Princi</u>	pal Office Address:		Mailing Address:
2052 Ben Franklin	Dr., Unit 502	2052	Ben Franklin Dr., Unit 502
The Limited Liability Compar nother business entity with an	gent, Registered Office, & l y cannot serve as its own Re active Florida registration.)	Registered Ager egistered Agent. V	
ARTICLE III - Registered A	gent, Registered Office, & S y cannot serve as its own Re active Florida registration.)	Registered Ager egistered Agent. V	ıt's Signature:
ARTICLE III - Registered Ag The Limited Liability Compar mother business entity with an	gent, Registered Office, & S y cannot serve as its own Re active Florida registration.) t address of the registered ag William R. Dodds, Jr.	Registered Ager egistered Agent. ' gent are:	
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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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

<u>l'itle:</u> 'AMBR" = Authorized Member	Name and Address:
MGR" = Manager	
MGR	William R. Dodds, Jr.
	2052 Ben Franklin Dr., Unit 502, Sarasota, Florida 34236
MGR	Ann Martin Dodds 2052 Ben Franklin Dr., Unit 502, Sarasota, Florida 34236
	2032 Bell Mankim Dr., Ont 302, Salasola, Florida 34230
· -	
V: Effective date, if other than the tive date is listed, the date must filing.) he date inserted in this block doe.	be date of filing:
ctive da <mark>te is listed, the</mark> date must <sup>*</sup> filing.)	be specific and cannot be more than five business days prior to or 90 s not meet the applicable statutory filing requirements, this date will no
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V: Effective date, if other than the tive date is listed, the date must filing.) The date inserted in this block does ent's effective date on the Depart VI: Other provisions, if any.  EFOURED SIGNATURE:  Signature of This document is I am aware that an constitutes a third	s not meet the applicable statutory filing requirements, this date will not the theorem of State's records.  f a member or an authorized representative of a member, executed in accordance with section 605.0203 (1) (b), Florida Statutes, y felse information submitted in a document to the Department of State degree felony as provided for in s.817.155, F.S.
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ARTICLE IV-