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(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
(Business Entity Name)				
(Document Number)				
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Sunshine State Corporate Compliance Company

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

DATE <u>08/18/2020</u>	_	**WA	LK IN**
ENTITY NAME OAKLA	ND TREE LLC		<u>.</u>
DOCUMENT NUMBER_			·
	PLEASE FILE THE	E ATTACHED AND RETURN	
XXXX	Plain Copy		
	Certified Copy		
	Certificate of Status		
***	Certified Copy of Arts & Certified Copy of Arts & Certificate of Status	OLLOWING FOR THE ABOVE ENTITY** & Amendments & Amendments Complete File (Inclading Annaal Reports) blecting:	
COUNTRY OF DESTINAT	,	OTARIAL CERTIFICATION**	
NUMBER OF CERTIFICAT			
TOTAL OWED \$ 125.00)	ACCOUNT # 120140000108 (Comporate Services, Inc. And you so much!)	gad
Please call Tina at th	he above number for any	ny issues or concerns. Thank you so much!	/

FILED

2020 AUG 18 AH 9: 41

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SECRETARY OF STATE TALLAHASSEE, FL

Mailing Address:

Oakland Tree 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:

Oakland Tree LLC	Oakland Tree LLC
2805 E. Oakland park Blvd Ste 348	2805 E. Oakland Park Blvd Ste 348
Fort Lauderdale, EL 33306	Et Lauderdale, FL 33306

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:

Principal Office Address:

City	State	Zip
Miami, FL 33	156	
Florida street address	(P.O. Box NOT a	cceptable)
9200 South Dad	leland Blvd. Ste	. 508
	Name	
United Corpora	te Services, inc.	

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..

Maria R. Fischetti Secretary

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

Title: "AMBR"	= Authorized Member	Name and Address:	
"MGR" =	Manager		
MGR		Old Times LLC 2805 E. Oakland Park Blvd. Ste 348	=
		Pt Lauderdale, FL 33306	- -
			- vs
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ARTICLE V: Effe If an effective date he date of filing.) Note: If the date in	e is listed, the date must be spe	of filing: (OPTIONAL) ceific and cannot be more than five business days prior to or 90 neet the applicable statutory filing requirements, this date will not of State's records.	•
	er provisions, if any.		
REOUIR	<u>ED</u> SIGNATURE:		
	S/JOHN CANHA	M	
	This document is execut I am aware that any false	mber or an authorized representative of a member. ed in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State felony as provided for in s.817.155, F.S.	
	John Canham aut	horized representative	
	1 200.1	Typed or printed name of signee	

Filing Fees:

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

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