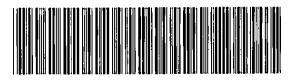
L2000030023 |

(Requestor's Name)		
(Address)		
(Address)		
(City/State/Zip/Phone #)		
PICK-UP WAIT MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer		

Office Use Only



500353105105

10/05/20--01002--010 **155.00

JALLAHASSEE, FLORIDA

RECEIVED

THE SAFATIVE

C RICO

2020 OCT -2 AM 8: 28

CORPORATE

When you need ACCESS to the world

ı	A (CÇI	ESS,

1.

3.

INC. 236 East 6

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

		WALK IN		
PICK UP: 10/02/2020				
кж	CERTIFIED COPY			
	PHOTOCOPY CUS			
сх	FILING	LLC		
((IFLPI, LLC CORPORATE NAME AND DOCUME			
((CORPORATE NAME AND DOCUME	ENT#)		
((CORPORATE NAME AND DOCUME	ENT #)		
((CORPORATE NAME AND DOCUME	ENT#)		
((CORPORATE NAME AND DOCUME	ENT #)		
((CORPORATE NAME AND DOCUME	ENT #)		
CIAL RUCT	ΓΙΟΝS:			
				

ARTICLES OF ORGANIZATION OF HFLPI, LLC

The undersigned, as the organizing Member of this limited liability company pursuant to Chapter 605 of the Florida Statutes, hereby forms a limited liability company under the laws of the State of Florida and adopts the following Articles of Organization for said limited liability company:

ARTICLE I - NAME OF LIMITED LIABILITY COMPANY

The name of this limited liability company shall be HFLPI, LLC.

ARTICLE II - PERIOD OF DURATION

The period of duration of this limited liability company shall commence on September 29, 2020, and shall continue until dissolved pursuant to Chapter 605 of the Florida Statutes.

ARTICLE III - MAILING ADDRESS AND PRINCIPAL OFFICE

The mailing address of this limited liability company shall be 2425 Tamiami Trail N, Suite 211, Naples, Florida 34103. The street address of the principal office of this limited liability company shall be 2425 Tamiami Trail N, Suite 211, Naples, Florida 34103.

ARTICLE IV - INITIAL REGISTERED OFFICE AND REGISTERED AGENT

The initial street address of the registered office of this limited liability company in the State of Florida shall be 2425 Tamiami Trail N, Suite 211, Naples, Florida 34103. The Members may from time to time move the registered office to any other address in Florida. The name of the initial registered agent of this limited liability company at that address is George A. Wilson. The Members may from time to time designate a new registered agent.

ARTICLE V - MANAGEMENT

This limited liability company shall be managed by a Manager. The initial Manager shall be Cynthia E. Henderson.

ARTICLE VI - NEW MEMBERS

Additional persons may be admitted to this limited liability company as Members only with the prior written consent of all of the existing Members, or as otherwise permitted in accordance with the Operating Agreement for this limited liability company.

ARTICLE VII - ORGANIZING MEMBER

The name and address of the Member of the limited liability company signing these Articles of Organization are:

N	ame
1.	miii.

Cynthia E. Henderson, General Partner of Henderson Family Partners I, L.P., AMBR

Carolyn A. Henderson, as Trustee of the Carolyn A. Henderson Revocable Trust dated 9/3/96, General Partner of Henderson Family Partners I, L.P., AMBR

Address

1016 Celestial Street Cincinnati, Ohio 45202

940 Cape Marco Drive, Unit 2101 Marco Island, Florida 34145

IN WITNESS WHEREOF, the undersigned Member has made and subscribed these Articles of Organization, as of the <u>25</u> day of <u>SEPTEMBIY</u>, 2020.

Henderson Family Partners I, L.P4, AMBR

Cynthia E Henderson General Portner

By: (drolen a Hendelson)

Carolyn A. Henderson, as Trustee of the Carolyn A. Henderson Revocable Trust dated 9/3/96, General Partner

ACCEPTANCE BY REGISTERED AGENT

Having been named as registered agent and to accept service 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 in Chapter 605 of the Florida Statutes.

Dated as of 10 1 . . . , 2020

George A. Wilson

G:\USH\hendersonFamilyPartners! - HFPLI LLC.art.wpd