Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

. (850)617-6381 Fax Number

From:

Account Name - ZIMMERMAN, KISER, & SUTCLIFFE, P.A.

Account Number : I19990000006 Phone : (407)425~7010

Fax Number : (407)425-2747

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Corporate@zkslawfirm.com

FLORIDA LIMITED LIABILITY CO. BERKELEY BENSCHLEY CLASS B, LLC

Certificate of Status	0
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Page Count	04
Estimated Charge	\$125.00

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COVER LETTER

	New Filing Secti Division of Corp								
		BENSCHLEY C	LASS B,	LLC					
SUBJEC	T:	Name	of Limited	Liabili	ty Company				
The enclo	osed Articles of C	Organization and fed	e(s) ar e su'	bmitted	for filing.				
Please ret	Iurn all correspon	idence concerning (this matter	to the fe	ollowing:				
	N. DWAYNE	GRAY, JR., ESC	۵.						
			۸	ame of	Person	<u> </u>			
•	ZIMMERMAN KISER SUTCLIFFE, P.A.								
	Firm/Company							2828 OC 1	
	315 E ROBINSON STREET, SUITE 600						22	100	• ,
	Address							12	<u> </u>
	ORLANDO,	FL 32801						P	
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For further		cerning this matter,			•	•			
	BARBIE A. B		407		425-7010				
	Name	of Person) 1a_ Arca	Codc	Daytime Telephon	e Number			
Enclosed	is a check for the	e following amount	,,						
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	New Fil Division P.O. Bo	Address ing Section n of Corporations ix 6327 ssee, FL 32314			Street Address New Filing Section Di The Centre of Taliaha 2415 N. Monroe Stre Tallahassee, FL 3230	assee et, Suite 810			

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

BERKELEY BENSCHLEY CLASS B, 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:

Principal Office Address:

Mailing Address:

1105 KENSINGTON PARK DRIVE 1105 KENSINGTON PARK DRIVE SUITE 200 ALTAMONTE SPRINGS, FL 32714 ALTAMONTE SPRINGS, FL 32714

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

N. DWAYNE GRAY, JR., ESQ.

City

(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:

Name 315 E ROBINSON STREET, SUITE 600 Florida street address (P.O. Box NOT acceptable) DRLANDO

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.,

Registered Agent's Signature (REQUIRED)

(CONTINUED)

(((H20000354335 3)))

Title:	Name and Address:	
"AMBR" ~ Authorized ! "MGR" = Manager	Member	
MBRAICR	JONATHAN L. WOLF	
INGINEROIL	1105 KENSINGTON PARK DRIVE, SLITE 200	
	ALTAMONTE SPRINGS, FL 32714	
MBR	JONATHAN AND NANCY WOLF FAMILY TRUST DATED AUGUST 8, 2018	
	1105 KENSINGTON PARK DRIVE, SUITE 200	
	ALYAMONTE SPRINGS, FL 32714	
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Filine 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)