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Name:	TROPICAL WTERS RESORT, LLC
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Amount: \$ 125.00

Thank you!

ARTICLES OF ORGANIZATION

TROPICAL WATERS RESORT, LLC.
a Florida limited liability company

ARTICLE I NAME

The business and affairs of the Limited Liability Company shall be conducted under the name of:

TROPICAL WATERS RESORT, LLC

ARTICLE II PRINCIPAL OFFICE AND MAILING ADDRESS

The street address of the principal place of business of the Limited Liability Company within the State of Florida shall be:

240 South Pineapple Avenue
10th Floor
Sarasota, Florida 34236

and, the mailing address of the Limited Liability Company shall be:

c/o Juan C. Villaveces
P.O. Box 49948
Sarasota, Florida 34230-6948

ARTICLE III INITIAL REGISTERED AGENT/OFFICE

The registered office of the Limited Liability Company and its initial registered agent shall be:

Juan C. Villaveces
240 South Pineapple Avenue
10th Floor
Sarasota, Florida 34236

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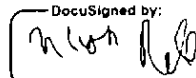
ARTICLE IV
MANAGEMENT AND POWERS

The business and affairs of the Limited Liability Company shall be managed by one or more Managers elected as provided in the Operating Agreement of the Limited Liability Company. The initial Manager shall be as follows:

Hugh Reid, Jr.
P.O. Box 49948
Sarasota, Florida 34230-6948

10/13/2020

These Articles of Organization have been executed as of the ____ day of October, 2020.

DocuSigned by:

004A1091C2E3432 ..
Hugh Reid, Jr.

"MANAGER"

CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 605.0203 of the Florida Statutes, the undersigned Limited Liability Company submits the following statement to designate a registered office and registered agent in the State of Florida.

1. The name of the Limited Liability Company is:

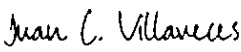
TROPICAL WATERS RESORT, LLC

2. The name and the Florida street address of the registered agent are:

Juan C. Villaveces
240 South Pineapple Avenue
10th Floor
Sarasota, Florida 34236

Having been named 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 relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

Date: 10/13/2020

DocuSigned by:

82E310C25E3B44A

Juan C. Villaveces

"REGISTERED AGENT"