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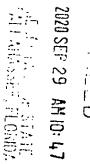
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T. SCOTT



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COVER LETTER

TO:

	ew Filing Sec ivision of Cor							
SUBJECT		alty Tamarac, LLC						
ooboze.	Name of Limited Liability Company							
The enclose	ed Articles of	Organization and fee(s) a	re submitted	for filing.				
Please retur	m all correspo	ondence concerning this n	natter to the f	ollowing:				
	Jennifer E. Z	akin, Esq.						
			Name of	Person				
	Redgrave &	Rosenthal LLP						
	Firm/Company							
	225 N.E. Miz	zner Boulevard, Suite 440)					
			Addr	ess				
	Boca Raton,	Florida 33432						
i	zakin@redgra	aveandrosenthal.com	City/State an	d Zip Code				
_		E-mail address: (to be use	d for future a	nnual report notificati	on)			
For further in	nformation co	ncerning this matter, plea	se call:					
	Jennifer E. Za	akin, Esq.	561	347-1700				
•	Nam		Area Code	Daytime Telephon	e Number			
Enclosed is	a check for th	ne following amount:						
■\$125.00		□\$130.00 Filing Fee & Certificate of Status	Certifi	5.00 Filing Fee & ed Copy al copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)			
	New Fi Divisio P.O. B	g Address iling Section on of Corporations ox 6327 assec. FL 32314		Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stre Tallahassee, FL 3230	assee et, Suite 810			

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability	Company is:			
Palshua Realty Tamara (Must contai		ability Com	pany, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street add	ress of the principal off	ice of the Li	mited Liability Company is:	
Principal	Office Address:		Mailing Add	dress:
2230 NW 22nd Street, Pompano Beach, Florid	·		2230 NW 22nd Street, Suite Pompano Beach, Florida 33	
ARTICLE III - Registered Agen (The Limited Liability Company c another business entity with an ac	annot serve as its own R	legistered A		individual or
The name and the Florida street ad	dress of the registered a	gent are:		
	Jennifer E. Zakin, Esq.			
		Name		
	225 N.E. Mizner Bould Florida street address (
	Boca Raton	FL	33432	

City

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. If 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..

Zip

Registered Agent's Signature (REQUIRED)

(CONTINUED)

State

2020 SEP 29 AM 10: 47

ARTICLE IV-

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

If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed cument's effective date on the Department of State's records.	Title:	Same and Address:
(Use attachment if necessary) CLEV: Effective date, if other than the date of filing:		et
(Use attachment if necessary) CLEV: Effective date, if other than the date of filing: (OPTIONAL) effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days atteet of filing.) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed cument's effective date on the Department of State's records. CLEVI: Other provisions, if any. REOURED SIGNATURE: Signature of a member or an abborized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any laise information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.	"MGR" = Manager	
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(Use attachment if necessary) CLE V: Effective date, if other than the date of filing:		2230 NW 22nd Street, Suite 1
(Use attachment if necessary) T.E.V: Effective date, if other than the date of filing:		Pompano Beach, Florida 33069-1319
(Use attachment if necessary) T.E.V: Effective date, if other than the date of filing:		
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May Mana	I am aware tha	at any false information submitted in a document to the Department of State
Typed or printed name of signee		
	iviax ivi	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 5.00 Certificate of Status (Optional)