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| PICK-UP | MAIT WAIT | MAIL |
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TALLAHASSEE, FL 32301

PH: 850-524-4381

PLEASE FILE THE ATTACHED ARTICLES FOR:

AURORA INVESTORS GPNER, LLC

PLEASE RETURN A CERTIFIED COPY

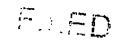
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THANK YOU!

COVER LETTER

| | ew Filing Sec ivision of Co | | | | |
|----------------|--------------------------------|--|------------------|--|---|
| SUBJECT | | vestors GPNER, LLC | | | |
| SOBJECT | • | Name o | of Limited Liab | ility Company | |
| The enclos | ed Articles of | Organization and fee | (s) are submitte | ed for filing. | |
| Please retu | rn all corresp | ondence concerning th | is matter to the | following: | |
| | Alan H. Bas | eman, Esq. | | | |
| | | | Name o | of Person | |
| | Comiter, Sir | nger. Baseman & Brai | ın, LLP | | |
| | | | Firm/C | Company | |
| | 3825 PGA E | Blvd., Suite 701 | | | |
| | | | Add | iress | |
| | Palm Beach | Gardens, FL 33410 | | | |
| | corporate@co | omitersinger.com | City/State a | ind Zip Code | |
| • | 1 | E-mail address: (to be | used for future | annual report notificat | ion) |
| For further in | nformation co | ncerning this matter, p | olease call: | | |
| | Rebecca Bye | ers | 561 at (| 626-2101 | |
| | Nam | e of Person | | Daytime Telephon | ne Number |
| Enclosed is | a check for t | he following amount: | | | |
| | Filing Fee | □\$130.00 Filing F Certificate of Statu | s Certi | 55.00 Filing Fee & fied Copy nal copy is enclosed) | ☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | New F Divisio P.O. B | g Address iling Section on of Corporations ox 6327 assee, FL 32314 | | Street Address New Filing Section D The Centre of Tallaha 2415 N. Monroe Stre Tallahassee, FL 3230 | assee et, Suite 810 |



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2020 DEC -8 PM 2: 40

SECRETARY OF STATE TALLAHASSEE, FL

ARTICLE I - Name:

The name of the Limited Liability Company is:

| Aurora Investors GPNER, LLC (Must contain the words "Limited Liabi | lity Company, "L.L.C.," or "LLC.") |
|--|---|
| RTICLE II - Address: | |
| 'he mailing address and street address of the principal office | of the Limited Liability Company is: |
| Principal Office Address: | Mailing Address: |
| 3825 PGA Blvd., Suite 701 | 3825 PGA Blvd., Suite 701 |
| Palm Beach Gardens, FL 33410 | Palm Beach Gardens, FL 33410 |
| | |
| RTICLE III - Registered Agent, Registered Office, & Re | |
| The Limited Liability Company cannot serve as its own Regi nother business entity with an active Florida registration.) | stered Agent. You must designate an individual or |

, ,

Comiter, Singer, Baseman & Braun, LLP
Name

3825 PGA Blvd., Suite 701

Florida street address (P.O. Box NOT acceptable)

 Palm Beach Gardens
 FL
 33410

 City
 State
 Zip

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)

Title: "AMBR" = Authorized Member "MGR" = Manager MGR William M. Little 3825 PGA Blvd. Suite 701 Palm Beach Gardens, FL 33410 THE SUITE AUTHORISE SUITE SUIT

ARTICLE V: Effective date, if other than the date of filing: Dec 8th, 2020 ... (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any.

ARTICLE IV-

REQUIRED SIGNATURE:

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

Andrew R. Comiter, Authorized Representative

Typed or printed name of signee

Filing Fees:

S125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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