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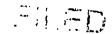
115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: I20000000088 January 07, 2021 Date:___ Ian Reilly Name:____ 1312469 Reference #:____ PA LIBERTY HILLS, LLC Entity Name:____ Articles of Incorporation/Authorization to Transact Business Amendment Change of Agent Reinstatement Conversion] Merger Dissolution/Withdrawal Fictitous Name Upon filing please provide Certified Copy Other _____

Authorized Amount:

\$155.00

Signature:



ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY 2001 1441

H 10 12

ARTICLE I - Name: The name of the Limited Liability Company is:	SECRETARY OF STATE TALLAHAMEE, FL
PA Liber	ty Hills, LLC
(Must contain the words "Limited Liabi	lity Company, "L.1C" 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:
777 Brickell Avenue	777 Brickell Avenue
Suite 1200	Suite 1200
Miami, Fl. 33131	Miami, FL 33131

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

(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:

JA	1GS 1 Capital, l	.LC
	Name	
777 Bri	ckell Avenue, Si	uite 1200
Florida street address	(P.O. Box <u>NOT</u> a	cceptable)
Miami	FL.	33131
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. Thereby 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.,

ドプペン つ 場れるい。 Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:	Name and Address:
MGR	PA Equity Investments, LLC 777 Brickell Avenue, Suite 1200
	Miami, FL 33131
	SECRUTAN T
	F) F
(Use attachme	ent if necessary)
	ted in this block does not meet the applicable statutory filing requirements, this date will not be listed we date on the Department of State's records. Tovisions, it'any.
REOUIRED	SIGNATURE:
	Charles .
	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, 1 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.
	Gavin Beekman, Authorized Signatory
	Typed or printed name of signee
	Filing Fres:
\$125.00 Fili \$-30.00 Ce	ng Fee for Articles of Organization and Designation of Registered Agent

\$ 5.00 Certificate of Status (Optional)