

L21000024030

Division of Corporations

Florida Department of State
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FLORIDA LIMITED LIABILITY CO.
WINMAR FLORIDA, LLC

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**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I. - Name

The name of the Limited Liability Company is:

WINMAR FLORIDA, LLC

ARTICLE II. - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

5959 Blue Lagoon Drive
Suite #100
Miami, FL 33126

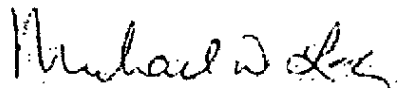
**ARTICLE III. - Registered Agent, Registered Office,
& Registered Agent's Signature**

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

Corpco, Inc.
901 Ponce de Leon Blvd.
10th Floor
Coral Gables, FL 33134

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:



Michael D. Katz, Esq.,
as President of Corpco, Inc.

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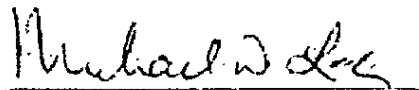
ARTICLE IV. – Management

The Limited Liability Company will be manager-managed. The name and address of the managers of the Limited Liability Company are:

Tom C. Murphy
5959 Blue Lagoon Drive
Suite #100
Miami, FL 33126

Sean M. Murphy
5959 Blue Lagoon Drive
Suite #100
Miami, FL 33126

Edwin Villegas
5959 Blue Lagoon Drive
Suite #100
Miami, FL 33126



Michael D. Katz, Esq., Authorized Representative of a Member(s)
(In accordance with section 605.0203 (1) (b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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.)

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Fax Coversheet

321 N Pass Ave.
Burbank, CA 91505
Ph. 818-557-8201 - Fax 818-557-8203

Date : 1/25/21 Pages : including coversheet. 5

To : Jason Krotine

Fax# : 850-617-6381

Sender's name : E Ian West

Sender's phone # : 424-375-8283

Sender's message :

Attention :

Jason Krotine