

1/29/2021

Division of Corporations

Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6381

From: Account Name : CAPITOL SERVICES, INC.
Account Number : I20160000017
Phone : (855)498-5500
Fax Number : (800)432-3622

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

FLORIDA LIMITED LIABILITY CO.
TRIPLE H INVESTMENT HOLDINGS, LLC

Certificate of Status	0
Certified Copy	1
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**ARTICLES OF ORGANIZATION
OF
TRIPLE H INVESTMENT HOLDINGS, LLC**

ARTICLE I: - Name

The name of the Limited Liability Company is Triple H Investment Holdings, LLC

ARTICLE II: - Address

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

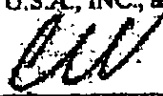
Boca Corporate Plaza
7900 Glades Road, Suite 402
Boca Raton, Florida 33434

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature
The name and the Florida street address of the registered agent are:

Service U.S.A., Inc.
7900 Glades Road, Suite 402
Boca Raton, Florida 33434

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.

SERVICE U.S.A., INC., as Registered Agent

By: Name: Eric V. BrownTitle: Vice President**ARTICLE IV: - Management**

The name and address of each person authorized to manage and control the limited liability company is as follows:

Title:Name and Address:

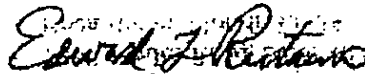
MGR

H. Wayne Huizenga, III
Boca Corporate Plaza
7900 Glades Road, Suite 402
Boca Raton, Florida 33434

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IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization
on January 29, 2021.



Edward L. Ristaino, authorized representative of a Member

(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 Section 817.155, Florida Statutes.)

Edward L. Ristaino

(Typed or printed name of signer)

I, the undersigned, do hereby certify that the foregoing is a true and correct copy of the Articles of Organization of the [Organization Name], as the same appear in the records of the Department of State.

Notary Public in and for the State of Florida
My Commission Expires [Date]

Witness my hand and the seal of my office this [Date] day of [Month], 2021.

Notary Public in and for the State of Florida
My Commission Expires [Date]

IN WITNESS WHEREOF, I have hereunto set my hand and the seal of my office this [Date] day of [Month], 2021.

Notary Public in and for the State of Florida
My Commission Expires [Date]

NOTARY PUBLIC IN AND FOR THE STATE OF FLORIDA
My Commission Expires [Date]