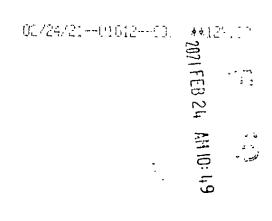
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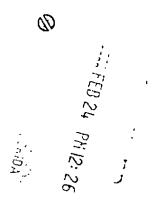
(Requestor's Name)
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(Business Entity Name)
(Document Number)
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COVERLETTER

	Sew Filing Secti Division of Corp				
		rock Manor, LLC			
SUBJEC	T:	Name of L	imited Lia	bility Company	
The enclo	sed Articles of C	Organization and fee(s)	are submit	ted for filing.	
Please ret	um all correspon	ndence concerning this	matter to t	he following:	
	John Ainswor	th, Esq.			
			Name	of Person	
	Ainsworth &	Clancy, PLLC			
			Firm	'Company	
	801 Brickell	Avenue, 8th Floor			
			Α.	ddress	
	Miami, FL 33	3131			
			City/Stat	e and Zip Code	
	info@business		ed for him	are annual report notificat	ion)
F 6.1					
ror jurther	r information col	icerning this matter, plo			
	John Ainswor		305 (600-3816)	
	Name	e of Person	Area Coo	de Daytime Telephor	ne Number
Enclosed	I is a check for th	ne following amount:			
	00 Filing Fee	☐\$130.00 Filing Fee Certificate of Status	C	IS155.00 Filing Fee & entified Copy itional 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 assee, FL 32314		Street Address New Filing Section E The Centre of Tallah 2415 N. Monroe Str Tallahassee, Fl. 323	nassee eet, Suite \$10

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

MODD Peacock	Manor, LLC contain the words "Limited I	inhility Company	1.1.C."or"(1.C.")		
(Must	contain the words "Lamited i	hapinty Company.	L.L.C., or mac.		
ARTICLE II - Address: The mailing address and str	eet address of the principal o	flice of the Limited	Liability Company is:		
<u>Pri</u>	ncipal Office Address:		Mailing Address:		
601 Beickell Ke	y Drive, Suite 700	601 1	Brickell Key Drive, Suite 700		
Miani, Fl. 3312		Mian	ni, FL 33131		
(The Limited Liability Con-	d Agent, Registered Office, pany cannot serve as its own han active Florida registratic	Registered Agent. \	t's Signature: 'ou must designate an individu	nal or	
(The Limited Liability Con another business entity wit	pany cannot serve as its own	Registered Agent. \ on.) I agent are: · PLLC	t's Signature: 'ou must designate an individu	ial or	2021 EI
(The Limited Liability Con- another business entity wit	pany cannot serve as its own h an active Florida registratio treet address of the registered	Registered Agent.) on.) Lagent are:	t's Signature: 'ou must designate an individu	nal or	շըoi FEB
(The Limited Liability Con- another business entity wit	pany cannot serve as its own h an active Florida registratio treet address of the registered	Registered Agent. Yon.) I agent are: , PLLC Name	t's Signature: 'ou must designate an individu	nal or	ንቦ፣ FEB 24
(The Limited Liability Con- another business entity wit	pany cannot serve as its own han active Florida registration treet address of the registered Ainsworth & Clancy	Registered Agent. Yon.) I agent are: PLLC Name Sth Floor	ou must designate an individu	al or	24
(The Limited Liability Con- another business entity wit	pany cannot serve as its own han active Florida registratic treet address of the registered Ainsworth & Clancy 801 Brickell Avenue Florida street address	in Registered Agent. Yon.) i agent are: PLLC Name Sth Floor St (P.O. Box NOT ac	ou must designate an individu	al or	24
(The Limited Liability Con- another business entity wit	pany cannot serve as its own han active Florida registratic treet address of the registered Ainsworth & Clancy 801 Brickell Avenue	Registered Agent. Yon.) I agent are: PLLC Name Sth Floor	cceptable)	al or	70º1 FEB 24 AM 10: 4

Registered Agent's Signature (REQUIRED)

(CONTINUED)

The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager The MODD Group, LLC MGR 601 Brickell Key Drive, Suite 700 Miami, FL 33131 (Use attachment if necessary) _. (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: ____ (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. 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. John Ainsworth - Legal Representative 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)

ARTICLE IV-

\$ 5.00 Certificate of Status (Optional)