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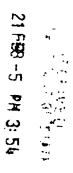
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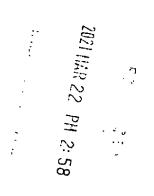
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## CORPORATE When you need ACCESS to the world ACCESS, \_\_\_\_ INC. 236 East 6th Avenue, Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666, Fax (850) 222-1666 WALK IN PICK UP: 3/22 Glinda CERTIFIED COPY XX **PHOTOCOPY CUS** $\mathbf{X}\mathbf{X}$ LLC **FILING** REAL ESTATE MANAGEMENT AND CONSULTING, LLC (CORPORATE NAME AND DOCUMENT #) (CORPORATE NAME AND DOCUMENT #)

1.

2.

3.

4.

5.

SPECIAL

**INSTRUCTIONS:** 

(CORPORATE NAME AND DOCUMENT #)

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:

	ement and Consulting, I	<del> </del>			
(Must con	tain the words "Limited	Liability Company.	"L.L.C.," or "LLC.")		
ARTICLE II - Address: The mailing address and street a	ddress of the principal o	office of the Limited	Liability Company is:		
Princip	oal Office Address:		Mailing Address:		
1209 3rd Street Sout	h, Suite 203	1209	3rd Street South, Suite 203		
Naples, FL 34102		Napl	es, FL 34102	_	
				<del>_</del>	
ARTICLE III - Registered Ag (The Limited Liability Company another business entity with an	y cannot serve as its owr active Florida registration	n Registered Agent. Yon.)	t <sup>†</sup> s Signature: (ou must designate an individual or 	2021 H.	, <del>-</del>
(The Limited Liability Company another business entity with an	y cannot serve as its owr active Florida registration address of the registered	n Registered Agent. Yon.)		2021 HAR 2	i ,
(The Limited Liability Company another business entity with an	y cannot serve as its owr active Florida registration	n Registered Agent. Yon.)		2021 MAS 22	÷.
(The Limited Liability Company another business entity with an	y cannot serve as its owr active Florida registration address of the registered	n Registered Agent. \ on.)  d agent are:  Name		$\sim$	
(The Limited Liability Company another business entity with an	y cannot serve as its owr active Florida registration address of the registered Jeff Novatt, Esq.	n Registered Agent. \ on.)  d agent are:  Name	ou must designate an individual or	22	- ن : اد .
(The Limited Liability Company another business entity with an	y cannot serve as its owr active Florida registration address of the registered Jeff Novatt, Esq.	n Registered Agent. You.) d agent are:  Name  Suite 432	ou must designate an individual or	22 PH	,

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..

(CONTINUED)

Registered Agent's Signature (REQUIRED)

Kathleen St James Taylor  1209 3rd Street South, Suite 203  Naples, FL 34102  See attachment if necessary)  7: Effective date, if other than the date of filing:  1: Company is a manager-managed limited liability company.    Company is a manager-managed limited liability company.	<u>Title:</u>	Name and Address:
See attachment if necessary)  7: Effective date, if other than the date of filing:  9: Ve date is listed, the date must be specific and cannot be more than five business days prior to or 90 (liling.)  1: date inserted in this block does not meet the applicable statutory filing requirements, this date will non's effective date on the Department of State's records.  7: Other provisions, if any.  1: Other provisions, if any.  1: an aware that any false information submitted in a document to the Department of State are not 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.  1: Jeff Novan, Esq., Authorized Representative	AMBR" = Authorized Member	
se attachment if necessary)  /: Effective date, if other than the date of filing:		Kathleen St. James Taylor
Naples, FL 34102    Sea attachment if necessary	VIOR	1209 3rd Street South Suite 203
Se attachment if necessary)  /: Effective date, if other than the date of filing:		Naples, FL 34102
se attachment if necessary)  /: Effective date, if other than the date of filing:		
se attachment if necessary)  /: Effective date, if other than the date of filing:		
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.  Jeff Novatt, Esq., Authorized Representative		
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