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To:

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From:

Account Name : FL PATEL LAW PLLC  
Account Number : I20170000097  
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Fax Number : (727)888-1294

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**FLORIDA LIMITED LIABILITY CO.**

**TSP The Springs, LLC**

JUL 26 2021

r. SCOTT

Certificate of Status	1
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2021 JUL 23 AM 10:34

FLORIDA  
DIVISION OF CORPORATIONS  
FILING CENTER

**ARTICLES OF ORGANIZATION  
FOR  
TSP THE SPRINGS, LLC  
A FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I.  
Name**

The name of the Limited Liability Company is: TSP The Springs, LLC (the "Company").

**ARTICLE II.  
Address**

The principal office of the Company is:

6032 Broad Oak Drive  
Davenport, Florida 33837

The mailing address of the Company is:

3500 Posner Blvd, #1054  
Davenport, FL 33837

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FILED  
CLERK OF CIRCUIT COURT  
IN AND FOR THE COUNTY OF  
HAWAII

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

The name and the Florida Street Address of the Registered Agent are:

FL Patel Law PLLC  
360 Central Avenue  
Suite 800  
Saint Petersburg, FL 33701

*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.*

*Ada Reyes*

(sign)

FL Patel Law PLLC

**ARTICLE IV.**  
**Authorized Members and Managers**

The Name and Address of each person authorized to manage and control the Limited Liability Company:

<u>Title</u>	<u>Name and Address</u>
<b>AMBR = Authorized Member</b> <b>MGR = Manager</b>	
<u>MGR</u>	Amar P Amte 6032 Broad Oak Drive Davenport, Florida 33837

**ARTICLE V.**

The Effective date shall be the date of filing.

*Amar P. Amte* (sign)

**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.

\_\_\_\_\_  
Amar P Amte  
Authorized Representative/Member