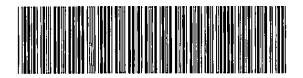
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COVER LETTER

TO:	New Filing Se Division of Co				
SUBJ	ECT.	North I	Lake Partner	rs LLC	
3003	ECT:	Name of Li	mited Liabil	lity Company	
The er	nclosed Articles of	f Organization and fee(s) a	re submittec	I for filing.	
Please	return all corresp	ondence concerning this m	atter to the	following:	
			Maura 2	Ziska	
			Name of	Person	
		1	Kochman &	Ziska PLC	
			Firm/Co	этралу	
		222 La	keview Ave	nue, Suite 1500	
			Addı	ress	
		West	Palm Beach	n, FL 33401	
	 		City/State an	•	
		E-mail address: (to be used	cklevy717@ d for future a		ion)
For furtl		oncerning this matter, pleas		•	•
	Maura Ziska		i61	802-8960	
	Nan			Daytime Telephon	e Number
Enclos	sed is a check for t	the following amount:			
	5.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	Certifi	5.00 Filing Fee & led Copy al copy is enclosed)	©\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		ng Address		Street Address	
		iling Section on of Corporations		New Filing Section Di The Centre of Tallaha	
	P.O. B	3ox 6327		2415 N. Monroe Stre	et, Suite 810
	Tallah	assee, FL 32314		Tallahassee, FL 3230	3

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY 2021 DET 25 AM 9: 17

Principal Office Address: Mailing Address: 440 Royal Palm Way, Suite 206 Palm Beach, FL 33480 RTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: the Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or other business entity with an active Florida registration.) The name and the Florida street address of the registered agent are: Maura Ziska, Esq. Name 222 Lakeview Avenue, Suite 1500 Florida street address (P.O. Box NOT acceptable) West Palm Beach City State Zip In given named as registered agent and to accept service of process for the above stated limited liability company at the se designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I thereby accept the appointment as registered agent and agree to act in this capacity. I there agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I					у.
RTICLE II - Address: the mailing address and street address of the principal office of the Limited Liability Company, "L.L.C.," or "LLC.") RTICLE II - Address: the mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing A	ie name of the Philited Plantity	Company is:		SECRETA VINE	~~ ~
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(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.") RTICLE II - Address: the mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: Mailing Address: Mailing Address: 440 Royal Palm Way, Suite 206 Palm Beach, FL 33480 RTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: the Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or other business entity with an active Florida registration.) the name and the Florida street address of the registered agent are: Maura Ziska, Esq. Name 222 Lakeview Avenue, Suite 1500 Florida street address (P.O. Box NOT acceptable) West Palm Beach City State Zip The above stated limited liability company at the see designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I here agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I familiar with and accept the obligations of my position as registered agent as provided for in Chapter 603, F.S		North Lake	Portners II C		<u> </u>
RTICLE III - Address: the mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address:	(Must contain			.L.C.," or "LLC.")	
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Name 222 Lakeview Avenue, Suite 1500 Florida street address (P.O. Box NOT acceptable) West Palm Beach FL 33401 City State Zip Fing been named as registered agent and to accept service of process for the above stated limited liability company at the re designated in this certificate. I hereby accept the appointment as registered agent and agree to act in this capacity. I here agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S		Maura	a Ziska. Eso.		
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(CONTINUED)

The name and address of each person authorized to manage and control the Limited Liability Company:

"AMBR" = Authorized Member "MGR" = Manager	
MGR	Jack Levy
	440 Royal Palm Way, Suite 206 Palm Beach, FL 33480
	FAITH DEACH, P.C. 33460
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	- <u> </u>
(Use attachment if necessary)	الله الله
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Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)