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SECRETARY OF STATE TALLAHASSEE, FL 2022 JAN -5 AM 8: 21

CORPORATE When you need ACCESS to the world ACCESS, _____

| TRIC | |
|------|--|
| 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

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|--------------|----|--|-----|-----------|-------------|-------------|-------------|
| | | PICK U | P: | 1/5 DANNY | | | |
| | | CERTIFIED COPY | | | | | |
| | XX | РНОТОСОРУ | | | | | |
| | XX | CUS | GS | | | | |
| | xx | FILING | LLC | | | | |
| 1. | | LAND AND WATER 15 TH (CORPORATE NAME AND DOCUMENT | | CE LLC | | | |
| 2. | | (CORPORATE NAME AND DOCUMENT | Γ#) | | | | |
| 3. | | (CORPORATE NAME AND DOCUMENT | Γ#) | | | | |
| 4. | | (CORPORATE NAME AND DOCUMENT | Γ#) | | | | |
| 5. | | (CORPORATE NAME AND DOCUMENT | Γ#) | | | | |
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| SPEC INST | | L CTIONS: | | | | | |
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COVER LETTER

| | v runng Se Islon of Co | ction rporations | | | |
|------------------|--------------------------------|---|-----------------|--|---|
| SUBJECT: | Land and | Water 15th Place LLC | | | |
| | | Name of | Limited Liab | ility Company | |
| The enclosed | Articles of | Organization and fee(| s) are submitte | ed for filing. | |
| Please return | ail corresp | ondence concerning thi | s matter to the | following: | |
| M | att Kuchl | | | | |
| | - | | Name o | of Person | |
| L | and and W | ater Investments, LLC | | | |
| _ | | - | Firm/C | ompany | |
| 50 | 03 Center S | Street | | | |
| _ | | | Add | ress | |
| L | ake Geneva | , WI 53147 | | | |
| mai | tt@keyston | ecres.net | City/State a | nd Zip Code | |
| | | -mail address: (to be u | sed for future | annual report notificat | tion) |
| For further info | rmation cor | ncerning this matter, pl | ease call: | | |
| Ma | att Kuchl | st | 2 6 2 | 745-6603 | |
| | Name | of Person | Area Code | Daytime Telephor | ne Number |
| Enclosed is a c | check for th | e following amount: | | | |
| □\$125.00 Fil | | ■\$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) |
| | New Fil Division P.O. Bo | Address ling Section of Corporations ox 6327 ssee, FL 32314 | | Street Address New Filing Section Di The Centre of Tallaha 2415 N. Monroe Stree Tallahassas Fl. 3230 | assee et, Suite 810 |

FILED

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2022 JAN -5 AM 8: 21

ARTICLE I - Name:

The name of the Limited Liability Company is:

SECRETARY OF STATE

| (Mus | st contain the words "Limited | l Liability Company, | "L.L.C.," or "LLC.") |
|---|--|--|--|
| ARTICLE II - Address: | | | |
| he mailing address and st | reet address of the principal | office of the Limited | Liability Company is: |
| <u>Pr</u> | incipal Office Address: | | Mailing Address: |
| 503 Center Stre | ≽εt | | |
| Lake Geneva, V | VI 53147 | | |
| | | | |
| The Limited Liability Con | d Agent, Registered Office, many cannot serve as its own h an active Florida registration | Registered Agent. | nt's Signature: You must designate an individual or |
| The Limited Liability Con nother business entity wit | mpany cannot serve as its own han active Florida registration treet address of the registered | n Registered Agent. (on.) d agent are: | nt's Signature: You must designate an individual or |
| The Limited Liability Con nother business entity wit | mpany cannot serve as its own h an active Florida registration | n Registered Agent. (on.) d agent are: | nt's Signature: You must designate an individual or |
| The Limited Liability Con nother business entity wit | mpany cannot serve as its own han active Florida registration treet address of the registered | n Registered Agent. You.) d agent are: nc. Name | nt's Signature: You must designate an individual or |
| The Limited Liability Con mother business entity wit | rpany cannot serve as its own han active Florida registration treet address of the registered Corporate Access, In | n Registered Agent. 1 on.) d agent are: nc. Name | You must designate an individual or |
| The Limited Liability Con mother business entity wit | rpany cannot serve as its own han active Florida registration treet address of the registered Corporate Access, In 236 East 6th Avenue | n Registered Agent. 1 on.) d agent are: nc. Name | You must designate an individual or |

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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|---|-------|-----|-----|------|
| А | RT | ILI | -P. | IV- |

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

| <u>Title:</u> "AMBR" = Authorized Member | Name and Address: | |
|--|--|---------------|
| "MGR" = Manager | | |
| AMBR | Land and Water Investments, LLC | |
| | 503 Center Street | |
| | Lake Geneva, WI 53147 | |
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| (The exact and | \vec{m} | _ |
| (Use attachment if necessary) | | |
| ARTICLE V: Effective date, if other than the date | of filing:, (OPTIONAL) | |
| (If an effective date is listed, the date must be sp | ecific and cannot be more than five business days prior to or 90 days after | |
| tne date of ming.) | neet the applicable statutory filing requirements, this date will not be listed a | |
| the document's effective date on the Department | of State's records. | . S |
| ARTICLE VI: Other provisions, if any. | | |
| | | |
| | | |
| | , // | |
| REQUIRED SIGNATURE: | | |
| | | |
| Signature of a me | mber or an authorized representative of a member. | |
| I his document is execut | ed in accordance with section 605.0203 (1) (b), Florida Statutes. | |
| constitutes a third degree | information submitted in a document to the Department of State felony as provided for in s.817.155, F.S. | |
| Matt Kuehl | | |
| | 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) \$ 5.00 Certificate of Status (Optional)