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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 **866.625.0838** COGENCYGLOBAL.COM

Account#: I20000000088

Date: January 25, 2022	Accountin. 12000000000
Name: GREG PINTACUDA	
Reference #:1578430	_
Entity Name: HOLLY SPRINGS IN	ESTMENTS, LLC
✓ Articles of Incorporation/Authorization	n to Transact Business
☐ Amendment	
Change of Agent	
Reinstatement	
Conversion	
Merger	
☐ Dissolution/Withdrawal	
☐ Fictitous Name	
✓ Otherapon	filing ceritifed copies
Authorized Amount: \$155	
Signature:	<u>e</u>

FILED

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

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SECRETARY OF STATE TALLAHASSEE, FL

Holly	$\sigma Sm$	ines	Investments,	LLC
1 14711	, ohr	mga	m comence,	171767

## ART

Princip	pal Office Address:		Mailing Address:	
777 Brickell Avenue		77 <b>7 I</b>	777 Brickell Avenue	
Suite 1200			Suite 1200	
Miami, FL 33131			Miami, FL 33131	
•	active Florida registration address of the registered	on.) d agent are: MGS 1 Capital, LI	ou must designate an individual or	
·	active Florida registration address of the registered J	on.) d agent are: MGS 1 Capital, LI Name	LC	
other business entity with an e name and the Florida street	active Florida registration address of the registered J	on.) d agent are: MGS 1 Capital, LI	uite 1200	
•	active Florida registration address of the registered J	on.) d agent are: MGS 1 Capital, Ll Name Brickell Avenue, S	uite 1200	

Registered Agent's Signature (REQUIRED)

(CONTINUED)

А	к	и	1 . P.	$TV_{\tau}$

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

<u>Title:</u>	Name and Address:
MGR	PC Holly Holdings, LLC
	777 Brickell Avenue, Suite 1200
	Miami, FL 33131
<del>-</del>	
	2022 T
	N 26 AM IO: 51
	AHIO: 51
(Use attachment if	necessary)
•	
ARTICLE V: Effective date	e. if other than the date of filing:
H an effective date is listed he date of filing.)	, the date must be specific and cannot be more than five business days prior to or 90 days after
Note: If the date inserted in	this block does not meet the applicable statutory filing requirements, this date will not be listed as
he document's effective da	te on the Department of State's records.
RTICLE VI: Other provis	ions, if any.
•	
<del></del> -	
<del></del>	
<u>REOUIRED</u> SIG	NATURE:
	the Comments
	Signature of a member or an authorized representative of a member.
	his document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
1 a	m aware that any false information submitted in a document to the Department of State institutes a third degree felony as provided for in s.817.155, F.S.
	Gavin Beekman, Authorized Signatory
	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)