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PICK-UP WAIT MAIL
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Incorporating Services, Ltd.

 1540 Glenway Drive Tallahassee, FL 32301

850.656.7956 Fax: 850.656.7953 www.incserv.com

e-mail: accounting@incserv.com

incserv

ORDER FORM

FROM

Florida Department of State
The Centre of Tallahassee
2415 North Monroe Street, Suite 810
Tallahassee, FL 32303
corphelp@dos.myflorida.com
850-245-6051

If you have any questions please contact me at 656-7956,

Melissa Moreau mmoreau@incserv.com 850.656.7953

REQUEST DATE 3/23/2022

PRIORITY Regular Approval

OUR REF_#_(Order_ID#) 1021230

ORDER ENTITY____FCM 2312 NMA LLC

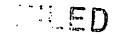
PLEASE PERFORM THE FOLLOWING SERVICES:
FCM 2312 NMA LLC (FL)
Please file the attached articles and provide a certified copy.
NOTES:
\$155.00 Authorized
Email address for annual report reminders: ccahane@fortecap.com
RETURN/FORWARDING INSTRUCTIONS:
ACCOUNT NUMBER: I20050000052
Please bill the above referenced account for this order.
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14

Sincerely,

Please bill us for your services and be sure to include our reference number on the invoice and courier package if applicable. For UCC orders, please include the thru date on the results.

Wednesday, March 23, 2022 Page 1 of 1



ARTICLES OF ORGANIZATION FCM 2312 NMA LLC

2022 HIR 23 PM 12: 00 MARY OF STATE

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, Florida Statutes Chapter 605.0112, as amended, hereby makes. acknowledges and files the following Articles of Organization.

ARTICLE I - NAME

The name of the limited liability company is FCM 2312 NMA LLC (the "Company").

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Company is 4045 Sheridan Avenue, Suite 221, Miami Beach, Florida 33140.

ARTICLE III - REGISTERED OFFICE AND AGENT AND ADDRESS

The name and street address of the registered agent and the registered office of the Company in the State of Florida are:

> Name: Address:

Incorporating Services, Ltd. 1540 Glenway Drive

Tallahassee, Florida 32301

ARTICLE IV - OFFICERS

The name, title and address of the person authorized to manage and control the limited liability company is:

> Name: Address:

Chaim Cahane, Manager 4045 Sheridan Avenue, Suite 221

Miami Beach, Florida 33140

IN WITNESS WHEREOF, the undersigned has made and subscribed these Articles of Organization for the foregoing uses and purposes this 23rd day of March, 2

Name: Chaim Cahane

Title: Manager

REGISTERED AGENTS ACCEPTANCE

Having been named as registered agent and to accept service of process for FCM 2312 NMA LLC at the place designated in this certificate, the undersigned hereby accepts the appointment as registered agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his duties, and is familiar with and accepts the obligations of his position as registered agent as provided for in Chapter 605. Florida Statutes.

Dated: March 23, 2022

Print Name: Incorporating Services, Ltd.

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