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From;

Account Name : GRAYROBINSON, P.A. - ORLANDO

Account Number : I20010000078 Phone : (407)843-8880 Fax Number : (407)244-5690

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: <u>tucker. Thonic gray-robinson</u> com

FLORIDA LIMITED LIABILITY CO.

Eagle View Cove TIC D LLC

Certificate of Status	0
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Page Count	03
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

The name of this Limited Liability Company is: Eagle View Cove TIC D LLC

ARTICLE·II Address

The initial mailing address and street address of the principal office of this Limited Liability Company is:

106 Commerce Street, Suite 104 Lake Mary, FL 32746

ARTICLE III Purpose

This Limited Liability Company is organized for the purposes of any lawful business under Chapter 605, Florida Statutes.

ARTICLE IV Management

This Limited Liability Company is to be managed by one or more managers and is, therefore, a "manager-managed" limited liability company,

Managers: Daniel Rowland, 106 Commerce Street, Suite 104, Lake Mary, FL 32746

ARTICLE IV Registered Agent, Registered Office & Registered Agent's Signature

The name and the Florida street address of the Registered Agent of this Limited Liability Company is:

GrayRobinson, P.A. 301 E. Pine Street, Suite 1400 Orlando, PL 32801 Attn: Tucker Thoni, Esq.

Having been named as registered agent to accept service of process for this limited itability company at the place so designated in these Articles of Organization, the undersigned hereby accepts this appointment and agrees to act in this capacity. The undersigned agrees to comply with the provisions of all statutes relating to the proper and

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complete performance of its duties and is familiar with and accepts the obligations of the undersigned's position as registreed agent, as provided for in Chapter 605, Florida Summes.

REGISTERED AGENT'S SIGNATURE

Tucker Thoni, Esq.

In accordance with Section 6B.0303(1)(b), Floride Statutes, the execution of this document constitutes an affirmation under the portalises of perfury that the facts stated herein are true. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided in Section 817.155, Floride Statutes.

AUTHORIZED REPRESENTATIVE'S SIGNATURE

Daniel Rowland, Amborized Representative

PARTICIPATION IN

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