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FLORIDA DEPARTMENT OF
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FLORIDA LIMITED LIABILITY CO.
3337 BRYN MAWR DR, LLC

Certificate of Status	0
Certified Copy	1
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ARTICLES OF ORGANIZATION
OF
3337 BRYN MAWR DR, LLC

The undersigned hereby acknowledges these Articles of Organization for the purpose of forming a Limited Liability Company under the Florida Revised Limited Liability Company Act, Chapter 605, Laws of Florida.

ARTICLE I

Name

The name of the Limited Liability Company is 3337 BRYN MAWR DR, LLC

ARTICLE II

Address

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

505 South Flagler Drive, Suite 900
West Palm Beach, Florida 33401

ARTICLE III

Registered Agent and Registered Office

The name and the Florida street address of the Registered Agent are:

Louis Cohen
505 South Flagler Drive, Suite 900
West Palm Beach, Florida 33401

ARTICLE IV

Management

The Limited Liability Company will be manager-managed.

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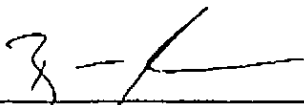
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ARTICLE V**Commencement**

The Limited Liability Company shall commence its existence upon filing with the Department of State of the State of Florida.

In accordance with Section 605.0203(1)(b), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.

Date: April 20, 2022



BRIAN D. KENNEDY
Authorized Representative

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**CERTIFICATE DESIGNATING PLACE OF
BUSINESS OR DOMICILE FOR THE SERVICE
OF PROCESS WITHIN THIS STATE, NAMING
AGENT UPON WHOM PROCESS MAY BE SERVED**


Pursuant to the provisions of Section 605.0113, Florida Statutes, this Limited Liability Company submits the following statement to designate a Registered Office and Registered Agent in the State of Florida:

That 3337 BRYN MAWR DR, LLC, desiring to organize under the laws of the State of Florida, has named LOUIS COHEN, located at the Registered Office of the Limited Liability Company at 505 South Flagler Drive, Suite 900, West Palm Beach, Florida 33401, as its Registered Agent to accept service of process within this state.

ACKNOWLEDGMENT:

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.

LOUIS COHEN,
Registered Agent

By 
Louis Cohen

CLERK OF STATE
TALLAHASSEE, FLORIDA

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