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Division of Corporations

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22 MAY -3 AM 9:01

STATE OF FLORIDA
DIVISION OF CORPORATIONS

**FLORIDA LIMITED LIABILITY CO.
PARADISE POINT MARINA SLIP 20, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
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MAY 04 2022

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May 2, 2022

FLORIDA DEPARTMENT OF STATE
Division of Corporations

EXPRESS

SUBJECT: PARADISE POINT MARINA SLIP 20, LLC
REF: W22000057150

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Tammi Cline

FAX Aud. #: H22000158704

Regulatory Specialist II Supervisor

Letter Number: 622A00010160

22 MAY -3 AM 9:01
DIVISION OF CORPORATIONS

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Paradise Point Marina Slip 20, LLC

(Must contain the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:3101 SW 13th DriveDeerfield Beach, FL 33442**Mailing Address:**3101 SW 13th DriveDeerfield Beach, FL 33442**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

Bestway Realty Sales, LLC

Name

13368 SW 128th StreetFlorida street address (P.O. Box **NOT** acceptable)Miami

City

FL

State

33186

Zip

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.

/s/ Maggie Salas

Registered Agent's Signature (REQUIRED)

(CONTINUED)

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
22 MAY -3 AM 9:01

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:AMBRArturo Alvarez
3101 SW 13th Dr.
Deerfield Beach, FL 33442AMBRJon Ander De Iribar
3101 SW 13th Dr.
Deerfield Beach, FL 33442

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 05/02/2022 (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.**ARTICLE VI:** Other provisions, if any.**REQUIRED SIGNATURE:****Signature of a member or an authorized representative of a member.**This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes.
I am aware that any false information submitted in a document to the Department of State
constitutes a third degree felony as provided for in s.817.155, F.S.Jon Ander De Iribar1st Jon Ander De Iribar

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)

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DEPARTMENT OF STATE
DIVISION OF CORPORATION