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Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE: 663017 7821525 AUTHORIZATION : Could COST LIMIT : ORDER DATE : May 6, 2022 ORDER TIME : 2:07 PM ORDER NO. : 663017-005 CUSTOMER NO: 7821525 DOMESTIC FILING NAME: BHG PROPERTIES FL LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION \_ CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING CONTACT PERSON: Alexxis Weiland - EXT. EXAMINER'S INITIALS:

CORPORATION SERVICE COMPANY

1201 Hays Street

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED

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The name of the Limited Liability Company is:

2022 MAY -6 PM 4: 11

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

SECRETARY OF STATE <del>- TALLAHAS</del>SEE, FL

#### ARTICLE II - Address:

The mailing address and stre	et address of the principal of	office of the Limited	Liability Company is:		
<u>Prir</u>	ncipal Office Address:		Mailing Address:		
6714 Stirling Ros Hollywood, Flor			6714 Stirling Road Hollywood, Florida 33024		
ARTICLE III - Registered (The Limited Liability Companother business entity with The name and the Florida str	nany cannol serve as its owr an active Florida registration reet address of the registered Firm Counsel, Chart	n Registered Agent, Yon.) d agent are: ered Name	t's Signature: Tou must designate an individual or		
	3325 S University D Florida street addres	rive, Suite 210 ss (P.O. Box <u>NOT</u> ac	rceptable)		
	Davie	Florida	33,328		
	City	State	Zip		
place designated in this certific urther agree to comply with th	ate. I hereby accept the app we provisions of all statules t e obligations of my position	gintment as registere elating to the proper	above stated limited liability company at the ed agent and agree to act in this capacity. I and complete performance of my duties, and I is provided for in Chapter 605, F.S		

(CONTINUED)

## ARTICLE IV-

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

<u>Title:</u>	Name and Address:					
	horized Member					
"MGR" = Мала	ger					
MGR	Eric Douglas					
	6714 Stirling Road					
	Hollywood, Florida 33024					
	WD 10 3:					
	and the second s					
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	To the second se					
<del> </del>						
(Use attachmen	tif necessary)					
(Ose dissemile)	in decessary)					
ARTICLE V: Effective of	late, if other than the date of filing:					
	ted, the date must be specific and cannot be more than five business days prior to or 90 days after					
the date of filing.)						
	d in this block does not meet the applicable statutory filing requirements, this date will not be listed as					
	date on the Department of State's records.					
	<del></del>					
ARTICLE VI: Other pro-	visions, if any.					
REQUIRED S	GNATURE:					
_						
	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.					
	Frie Develop					
	Eric Douglas Typed or printed name of signee					
	ryped or printed name or signee					

## Filing Pees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)