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| Special Instructions to Filing Officer.  |
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Office Use Only



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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| RT 4 Investments LLC                                      |   |   |                       |   |
|---|---|---|-----------------------|---|
| (Must cont  | ain the words "Limited                                    | Liability Company.  | "L.L.C.," or "LLC.")  |   |
| ARTICLE II - Address:<br>The mailing address and street a | ddress of the principal o                                 | office of the Limited                                       | Liability Company is: |   |
| <u>Princip</u>  | al Office Address:  |   | Mailing Address:      |   |
| 12771 World Plaza Lan                                     | ા <b>ર</b>  |   | I World Plaza Lane    |   |
| Suite 1-Z   |   | Suite   |                       |   |
| Fort Myers, Fl. 33907                                     |   | Fort  | Myers, FL 33907       |   |
|   | Andraw & Unetain  |   |                       |   |
|   | Andrew S. Epstein   | Name  |                       | · |
|   | Andrew S. Epstein 4600 Summerlin Road                     |   |                       |   |
|   |   | . Suite C-2524  | cceptable)            |   |
|   | 4600 Summerlin Road                                       | . Suite C-2524  | cceptable)            |   |
| aving been named as registered c                          | 4600 Summerlin Road Florida street addres Fort Myers City | . Suite C-2524<br>ss (P.O. Box <u>NOT</u> ad<br>FL<br>State | 33919<br>Zip          |   |

(CONTINUED)

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

| AMBR" = Manager  MGR" = Manager  Flevida SF Manager LLC  1271 World Plaza Lane, Suite 1-W  Fort Mores, FL 33012  V. Effective date, if other than the date of filling: (OPTIONAL)  tive date is listed, the date must be specific and cannot be more than five business days prior to or 9( filling.)  he date inserted in this block does not meet the applicable statutory filling requirements, this date will no  ent's effective date on the Department of State's records.  VI: Other provisions, if any.  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.  Fishzew S Lestein  Typed or printed name of signee  Filling Fees:  \$125.00 Filling Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certificate of Status (Optional) | Title:          |   | Name and Address:   |                                 |
|---|-----------------|---|---|---------------------------------|
| Use attachment if necessary)  V: Effective date, if other than the date of filing:  |                 |   |   |                                 |
| Use attachment if necessary)  V: Effective date, if other than the date of filing:  Live date is listed, the date must be specific and cannot be more than five business days prior to or 90 filing.)  he date inserted in this block does not meet the applicable statutory filing requirements, this date will no ent's effective date on the Department of State's records.  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.  And rew Signature of signee   | "MGR" = Man     | iager                                       |   |                                 |
| Use attachment if necessary)  V: Effective date, if other than the date of filing:  | MGR             | <u>_</u>                                    |   |                                 |
| Use attachment if necessary)  V: Effective date, if other than the date of filing:  |                 |   |   |                                 |
| Use attachment if necessary)  V: Effective date, if other than the date of filing:  |                 |   |   |                                 |
| Use attachment if necessary)  V: Effective date, if other than the date of filing:  |                 |   |   | ( , E                           |
| Use attachment if necessary)  V: Effective date, if other than the date of filing:  |                 |   |   |                                 |
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| Typed or printed name of signee   |                 | This document is exect am aware that any fa | cuted in accordance with section 605.0203 (1) (b). Flo<br>Ise information submitted in a document to the Depart | orida Statutes.                 |
| Typed or printed name of signee   |                 | 12  | • •   |                                 |
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| 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)  |                 | ## .  | ndrew S Epstein   | <u> </u>                        |
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| 5 5.00 Certificate of Status (Optional)   |                 | ng Fee for Articles of C                    | Typed or printed name of signee  Filing Fees: Organization and Designation of Registered Agent                  | (17)                            |
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