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COVER LETTER

TO: New Filing S Division of C					
SUBJECT.	REEL TRIO BLUFFS, LLC				
SUBJECT:	Name of Li	mited Liabili	y Company		
The enclosed Articles	of Organization and fee(s) a	re submitted	for filing.		
Please return all corres	pondence concerning this m	atter to the fo	ollowing:		
	•	Charles M. L	eSchack		
		Name of	Person		
	CUMM	INGS & LO	CKWOOD LLC		
		Firm/Cor	npany	· 	
	Six La	ındmark Squ	are, 9th Floor		
		Addre	SS		
		Stamford, C	T 06901		
		City/State and	•		
	E-mail address: (to be used	leschack@cl		ion)	
For further information of	concerning this matter, pleas		inuar report nourieau	(OII)	
	,				
Charles M.		203	351-4418)		
Na	me of Person A	Area Code	Daytime Telephon	e Number	
Enclosed is a check for	the following amount:				
□\$125.00 Filing Fee	☐\$130.00 Filing Fee & Certificate of Status	Certifie	.00 Filing Fee & d Copy I copy is enclosed)	☐S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
· · · · · · · · · · · · · · · · · · ·	ing Address		Street Address		
New Filing Section Division of Corporations			New Filing Section Division The Centre of Tallahassee		
P.O. Box 6327		-	2415 N. Monroe Street, Suite 810		
Talla	Tallahassee, FL 32314		Tallahassee, FL 32303		

CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500 ACCOUNT NO. : 12000000195 REFERENCE: 959487 4313323 AUTHORIZATION : Spelle Rear COST LIMIT : \$ 125.00 ORDER DATE: September 16, 2022 ORDER TIME : 2:35 PM ORDER NO. : 959487-005 CUSTOMER NO: 4313323 DOMESTIC FILING NAME: REEL TRIO BLUFFS, LLC EFFECTIVE DATE: _ ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP 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:

ARTICLES OF ORGANIZATION OF REEL TRIO BLUFFS, LLC

ARTICLE I Name

The name of this limited liability company is Reel Trio Bluffs, LLC (the "Company").

ARTICLE II Address

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

c/o David A. DeVos 8270 NW 49th Manor Coral Springs, FL 33067

ARTICLE III Purpose

The purpose for which the Company is organized is for any and all lawful business as a limited liability company.

ARTICLE IV <u>Duration</u>

The period of duration for the Company is perpetual.

ARTICLE V Registered Office and Agent

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

David M. Halpen Cummings & Lockwood LLC 3001 PGA Blvd., Suite 104 Palm Beach Gardens, FL 33410

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.

DAVID M. HALPEN

SECRETARY OF STATE

ARTICLE VI Management

The Company is to be managed by one or more managers and is, therefore, a manager-managed company. The names and addresses of the initial managers of the Company are:

Glen DeVos 1338 S. Jeaga Drive Jupiter, FL 33458 David A. DeVos 8270 NW 49th Manor Coral Springs, FL 33067

ARTICLE VII Limitation on Agency Authority of Members

Pursuant to section 605.04074, Florida Statutes, no member of the Company shall be an agent of the Company for the purpose of its business solely by virtue of being a member, and no member may bind the Company by taking any action solely by virtue of being a member.

ARTICLE VIII Written Operating Agreement

Any Operating Agreement entered into by the members of the Company, and any amendments or restatements thereof, shall be in writing. No oral agreement among any of the members or managers of the Company shall be deemed or construed to constitute any portion of, or otherwise affect the interpretation of, any written operating agreement of the Company, as amended and in existence from time to time.

Dated September 16, 2022

DAVID M. HALPEN
Authorized Representative

(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. 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.)

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