Laa00051044

| (1 | Requestor's Name) | |
|----------------------|------------------------|-------------|
| (. | Address) | |
| (| Address) | |
| (1 | City/State/Zip/Phone # |) |
| PICK-UP | ☐ WAIT | MAIL |
| (| Business Entity Name) | |
| (| Document Number) | |
| Certified Copies | Certificates of | f Status |
| Special Instructions | to Filing Officer: | |
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Office Use Only



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S. CHATHAM 202

COVER LETTER

| TO: | New Filing So Division of C | | | | |
|----------|--------------------------------|--|--|--|--|
| SUBJI | CT: | Key West | Conservatory LL | С | |
| 5000 | | Name of Lin | nited Liability Compa | ny | _ |
| The en | closed Articles | of Organization and fee(s) are | submitted for filing. | | |
| Please | return all corres | pondence concerning this ma | itter to the following: | | |
| | | | Ash Patel | | |
| | | | Name of Person | | |
| | | Key W | est Conservator | y LLC | . <u>-</u> |
| | | | Firm/Company | | |
| | | 1252 | N. Eagle Lake [|)rive | |
| | | | Address | | |
| | | | amazoo, MI 490 | | |
| | | | ity/State and Zip Cod | | |
| | | | 4amanagement. | | |
| | | E-mail address: (to be used | for future annual repo | ort notificati | on) |
| For furt | her information | concerning this matter, pleas | e call: | | |
| | COGEN | CY GLOBAL INC. at (_ | 866) | 625-08 | 38 |
| | N: | ame of Person A | rea Code Daytin | ie Telephon | e Number |
| Enclos | sed is a check fo | r the following amount: | | | |
| \$125.6 | 00 Filing Fee | \$130.00 Filing Fee & Certificate of Status | \$155.00 Filing F Certified Copy (additional copy is | | \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | New Div | iling Address v Filing Section ision of Corporations | | ng Section of Corporati | ons |
| | | . Box 6327 lahassec, FL 32314 | | unding cutive Cente see, FL 3230 | |



115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: I20000000088

| Date: 12/06/2022 |
|--|
| Name: Merritt Walker |
| Reference #: 1856415 |
| Entity Name: KEY WEST CONSERVATORY LLC |
| ✓ Articles of Incorporation/Authorization to Transact Business |
| Amendment |
| ☐ Change of Agent |
| Reinstatement |
| ☐ Conversion |
| ☐ Merger |
| ☐ Dissolution/Withdrawal |
| ☐ Fictitious Name |
| ✓ Other CERTIFIED COPY OF THE FILING EVIDENCE |
| |
| Authorized Amount: \$155 |
| Signature: |

F: +852.2682.9790

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| | Cey West Conservato | | |
|---|---|--|----------------|
| (Must contain the words | "Limited Liability Compar | y, "L.L.C.," or "LLC.") | |
| RTICLE II - Address: | | | |
| the mailing address and street address of the p | principal office of the Limit | ed Liability Company is: | |
| Principal Office Add | lress: | Mailing Address: | |
| 58 Front Street | | 58 Front Street | |
| Key West, FL 3304 | <u> 40</u> | Key West, FL 33040 | <u> </u> |
| | | | dual or |
| The Limited Liability Company cannot serve inother business entity with an active Florida | as its own Registered Agen registration.) | | dual or 22 DEC |
| The Limited Liability Company cannot serve inother business entity with an active Florida | as its own Registered Agen registration.) registered agent are: | t. You must designate an individ | N |
| ARTICLE III - Registered Agent, Registere The Limited Liability Company cannot serve another business entity with an active Florida The name and the Florida street address of the | as its own Registered Agen registration.) | t. You must designate an individ | 2 DEC -7 |
| The Limited Liability Company cannot serve inother business entity with an active Florida. The name and the Florida street address of the | as its own Registered Agen registration.) registered agent are: COGENCY GLOB | t. You must designate an individ | N |
| The Limited Liability Company cannot serve another business entity with an active Florida. The name and the Florida street address of the | as its own Registered Agen registration.) registered agent are: COGENCY GLOB Name | t. You must designate an individual of the state of the s | 2 DEC -7 PM |
| The Limited Liability Company cannot serve another business entity with an active Florida. The name and the Florida street address of the | as its own Registered Agen registration.) registered agent are: COGENCY GLOB Name 15 North Calhoun Street address (P.O. Box NO) | t. You must designate an individual of the state of the s | 2 DEC -7 PH 2: |

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..

Werritt Walker Merritt Walker, Asst. Secretary
Registered Agent's Signature (REQUIRED)

(CONTINUED)

| <u>Title:</u> "AMBR" = A "MGR" = Ma | uthorized Member | Name and Address: | | |
|--|---|--|----------------|---------------|
| MGI MGI | | Ash Patel | | |
| | | 1252 N. Eagle Lake Dr. | | |
| | | Kalamazoo, MI 49009 | ~~~ | ΛIG |
| MGI | R | Anja Patel | DEC | SIGN SEC : |
| | | 1252 N. Eagle Lake Dr. | !. | () () |
| | | Kalamazoo, MI 49009 | | (3) × |
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| (Use attachme | ent if necessary) | | | |
| ICLE V: Effective of the control of | e date, if other than the date of listed, the date must be speci | filling: (OPTION/ ific and cannot be more than five business days prior et the applicable statutory filing requirements, this date 'State's records. | to or 90 da | • |
| ICLE V: Effective of the control of | e date, if other than the date of listed, the date must be specited in this block does not med ve date on the Department of | ific and cannot be more than five business days prior et the applicable statutory filing requirements, this date | to or 90 da | • |
| ICLE V: Effective n effective date is late of filing.) E If the date inser- locument's effective ICLE VI: Other pro- | e date, if other than the date of listed, the date must be specited in this block does not med ve date on the Department of | ific and cannot be more than five business days prior et the applicable statutory filing requirements, this date | to or 90 da | • |
| ICLE V: Effective n effective date is late of filing.) E If the date inser- locument's effective ICLE VI: Other pro- | e date, if other than the date of listed, the date must be specited in this block does not med date on the Department of rovisions, if any. | ific and cannot be more than five business days prior et the applicable statutory filing requirements, this date | to or 90 da | • |
| ICLE V: Effective n effective date is late of filing.) E If the date inser- locument's effective ICLE VI: Other pro- | e date, if other than the date of listed, the date must be specited in this block does not mere date on the Department of rovisions, if any. SIGNATURE: Signature of a mem This document is executed I am aware that any false in | ific and cannot be more than five business days prior et the applicable statutory filing requirements, this date State's records. | e will not be | • |
| ICLE V: Effective effective date is late of filing.) If the date insert ocument's effective ocument's effective in the insert ocupanism in the insert occurrence in the insert ocupanism in the insert occurrence in th | e date, if other than the date of listed, the date must be specited in this block does not mere date on the Department of rovisions, if any. SIGNATURE: Signature of a mem This document is executed I am aware that any false in | et the applicable statutory filing requirements, this date 'State's records. /s/ Brian Belt ber or an authorized representative of a member. It in accordance with section 605.0203 (1) (b), Florida State of Sta | e will not be | • |

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)