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Division of Corporations

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From:

Account Name : NELSON MULLINS RILEY & SCARBOROUGH LLP OF BOCA RATON

Account Number : 076376001555 Phone : (803)255-9617 Fax Number : (561)483-7321

Enter the email address for this business entity to be used for future annual *report mailings. Enter only one email address please.

msiwiec2@gmail.com Email Address:___

FLORIDA LIMITED LIABILITY CO. 2641 Middle River Drive LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION OF

2641 MIDDLE RIVER DRIVE LLC

The undersigned does hereby subscribe to, acknowledge and file the following Articles of Organization for the purpose of creating a limited liability company under the laws of the State of Florida.

ARTICLE I

The name of this limited liability company shall be 2641 MIDDLE RIVER DRIVE LLC.

ARTICLE II

The street address of the principal office of the limited liability company shall be 610 West Las Olas Blvd., Fort Lauderdale, FL 33312. The mailing address shall be 610 West Las Olas Blvd., Fort Lauderdale, FL 33312 with the privilege of having its offices and branch offices at other places within or without the State of Florida.

ARTICLE III

The initial registered office of this limited liability company is 515 E Park Avenue. Floor 2. Tallahassee, FL 32301. The initial registered agent at that address is Capitol Corporate Services, Inc.

ARTICLE IV

The limited liability company shall be Manager Managed. The initial Manager of the limited liability company is: Michael Siwiec, Sr.

ARTICLE V	ΓĄ.	20	
This limited liability company shall commence its existence as of the filing	g hereof a	ınd ıs ha	dl
exist perpetually thereafter unless sooner dissolved.	3	- PX	
IN WITNESS WHEREOF, the undersigned authorized representative h	as execu	ed the	se i
Articles of Organization as of April $\frac{12}{}$, 2023.	<u>. n</u>	≥	1
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-mana			
Michael Siwiec, Sr.			
Authorized Representative			

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

Pursuant to the provisions of Section 605.0113, Florida Statutes, the limited liability company referenced below submits the following statement in designating the registered office/registered agent, in the State of Florida.

FIRST -- The name of the limited liability company is:

2641 MIDDLE RIVER DRIVE LLC

SECOND - The name and address of the registered agent and office is:

Capitol Corporate Services, Inc. 515 E. Park Avenue, Floor 2 Tallahassee, FL 32301

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.

Dated as of the 13th day of April, 2023

Toylor Deg			
Taylor Seay, Asst. Secretary	on behalf of	20	
Capitol Corporate Services, Inc.	LLAHASSFI	29 APR 13	, i
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