5/25/23, 9:41 AM

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Division of Corporations

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FLORIDA LIMITED LIABILITY CO. MERCOL GROUP LLC

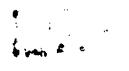
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		N	ime of L	mited Liab	ility Company		•	
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		rrespondence concerni						
	JEAN (G MERISIER						
				Name o	Person			
	MERCO	OL GROUP LLC						
				Firm/Co	ompany.		(i) (S)	
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New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address

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The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

To: 18506176381 From: 19545731480 Date: 05/25/23 Time: 1:46 PM Page: 04/05

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

<u>M</u> E	ERCOL GROUP LLC (Must contain the words "Limited Liabi	lity Company, "L.L.C.," or "LLC.")
ARTICLE II		
he mailing ac	dress and street address of the principal office	of the Limited Liability Company is
	Principal Office Address:	Mailing Address:
137	71 EAST GOLFVIEW DRIVE	1387 SW 105TH AVE
PE	MBROKE PINES FL 33026	PEMBROKE PINES FL 33025

JEAN G MERISIER Name

1371 EAST GOLFVIEW DRIVE

Florida street address (P.O. Box NOT acceptable)

PEMBROKE PINES FL 33026 TT 25

City State Zip FA Company along the above stated limited liability company along FA Company Al further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duttes and further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duttes and find find further with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MANAGER	JEAN G MERISIER 1371 BAST GOLFVIEW DRIVE PEMRBOKE PINES FL 33026
(Use attachment if necessary)	ite of filing: (OPTIONAL)
of filing.) If the date inserted in this block does not innent's effective date on the Department. EVI: Other provisions, if any.	t meet the applicable custom (Gion consistences)
REQUIRED SIGNATURE.	
REQUIRED SIGNATURE:	
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