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Email	Address:			

FLORIDA LIMITED LIABILITY CO. CAPE CO ONE DEV PARTNERS LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COATRANY

	COMPACT SHITTERS AND SHIP SHIP SHIP SHIP SHIP SHIP SHIP SHIP			
ARTICLE 1 - Name: The name of the Limited Liability Company is:				
CAPE CO ONE DEV PARTNERS LLC (Must end with the words "Limited	Liability Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the principal of				
Principal Office Address:	Mailing Address:			
201 GALEN DR KEY BISCAYNE FL 33149	201 GALEN DR KEY BISCAYNE FL 33149			
ARTICLE III - Registered Agent, Registered Office, & (The Limited Liability Company cannot serve as its own another business entity with an active Florida registration	Registered Agent. You must designate an individual or			
The name and the Florida street address of the registered	agent are:			
SERGIO A FLEITES CPA Nume				
1575 SW 87TH AVE Florida street address (P.O. Box NOT acceptable)				
MIAMI	FL 33174			
City	Zip			
Having been named as registered agent and to accept scr	vice of process for the above stated limited liability compe			

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.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV.			
The name and address of each person out	orized to manage and control the Limited Liability Company:		
and the state at t	orized to manage and control the Limited Liability Company:		
<u>Title:</u> "AMBR" = Authorized Member "MGR" = Manager	Name and Address:		
MGR	CLIC B		
	CHC Development Partners LLC		
	<u>-eor Galen Dr Abt 336 W</u>		
	Key Biscayne , FL 33149		
MGR	JRF Developments LLC 201 Galen Dr		
	KEY BISCAYNE, FL 33149		
(Use attachment if necessary)			
ARTICLE V: Effective date, if other than the date of (If an effective date is listed, the date must be specifithe date of filing.)	filing: <u>06/01/2023</u> (OPTIONAL) ic and cannot be more than five business days prior to or 90 days afte		
ARTICLE VI: Other provisions, if any,			
REQUIRED SIGNATURE:			
constitutes an affirmation under th	er or an authorized representative of a member. 203 (1) (b). Florida Statutes, the execution of this document e penalties of perjury that the facts stated herein are true, ion submitted in a document to the Department of State s provided for in s.817.155, F.S.)		

SERGIO A FLEITES CPA - REGISTERED AGENT
Typed or printed name of signee

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED

In pursuance of Chapter 607.34 Florida Statutes, the following is submitted, in compliance with said Act:

First: That, CAPE CO ONE DEV PARTNERS LLC

desiring to organize under the laws of the State of Florida with its principal office as indicated in the articles of incorporation at the City of Miami, County of Miami-Dade, State of Florida has named Sergio A. Fleites, C.P.A., located at 1575 SW 87 AVE, Miami, Fl 33174, City of Miami, County of Miami-Dade, State of Florida, as its agent to accept service of process within this state.

ACKNOWLEDGEMENT:

Having been named to accept service of process for the above stated corporation, at place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

Sefgio A. Fleites, C.P.A.

(Registered Agent)