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Florida Department of State
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Division of Corporations
Fax Number : (850)617-6381

From:
Account Name : LYONS & LYONS, P.A.
Account Number : I20030000061
Phone : (239)948-1823
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Email Address: richard.lyons@lyons-law.com

RECEIVED
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DIVISION OF CORPORATIONS
TALLAHASSEE, FL

FLORIDA LIMITED LIABILITY CO.
ThiconSuns 625 NW 2nd, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION
OF
THICONSUNS 625 NW 2nd, LLC

ARTICLE I – NAME

The name of the limited liability company is ThiconSuns 625 NW 2nd, LLC. (the "Company").

ARTICLE II – ADDRESS

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

Principal Office Address:

106 Hancock Bridge Parkway, D-15 #505
Cape Coral, Florida 33991

Mailing Address:

6015 Boca Raton Drive
Dallas, Texas 75230

ARTICLE III - REGISTERED AGENT,
REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE

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

L&L PARA, Ltd. Co.
27911 Crown Lake Boulevard, Suite 209
Bonita Springs, Florida 34135

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.

L&L PARA, Ltd. Co., a
Florida limited liability company

By: Linda M. Stevens
Linda M. Stevens
Its: Manager

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ARTICLE IV - MANAGERS OR MEMBERS

The name and address of each person authorized to manage and control the Limited Liability Company:

Title:

"MGR" = Manager

"AMBR" = Authorized Member

Name and Address:

MGR

Logan B. Frazier
106 Hancock Bridge Parkway, D-15 #505
Cape Coral, Florida 33991

MGR

Thies Pickenpack
6015 Boca Raton Drive
Dallas, Texas 75230

REQUIRED SIGNATURE:

DocuSigned by:

Thies Pickenpack

Signature of a member or an authorized representative of a member

This document is executed in accordance with section 605.0203(1)(b), Florida Statutes. 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.

Thies Pickenpack

Typed or printed name of signer

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