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| Special Instructions to Filing Officer  |
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TALLAHASSEE, FLORIDA

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Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE: 098687 4333422 AUTHORIZATION : COST LIMIT : \$ 125.00 ORDER DATE: October 30, 2023 ORDER TIME : 2:05 PM ORDER NO. : 098687-015 CUSTOMER NO: 4333422 DOMESTIC FILING NAME: RJ KING INVESTMENTS 3 LLC EFFECTIVE DATE: \_\_\_ ARTICLES OF INCORPORATION \_\_\_ CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: \_\_\_ CERTIFIED COPY XX PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING

EXAMINER'S INITIALS:

CONTACT PERSON: Alexxis Weiland-sorenson - EXT.

CORPORATION SERVICE COMPANY

1201 Hays Street

## **COVER LETTER**

|               | lew Filing Section<br>Division of Corporations  |                   |  |   |
|---------------|---|-------------------|--|---|
| SUBJECT       | RJ King Investments 3 LLC   |                   |  |   |
| SOBJECT       |   | f Limited Liabil  | ity Company  | <del></del>   |
| The enclos    | sed Articles of Organization and fee(   | s) are submitted  | for filing.  |   |
| Please retu   | ım all correspondence concerning thi  | s matter to the f | ollowing:  |   |
|               | Sonia K. Lowe, Paralegal  |                   |  |   |
|               |   | Name of           | Person   |   |
|               | Baker & Hostetler LLP   |                   |  |   |
|               |   | Firm/Co           | mpany: -   |   |
|               | 200 Civic Center Drive, Suite 1   | 200               |  |   |
|               |   | Addre             | ess  |   |
|               | Columbus, Ohio 43215  |                   |  |   |
|               | mgraban@bakerlaw.com  | City/State and    | d Zip Code   |   |
|               | E-mail address: (to be  | used for future a | nnual report notificati  | on)   |
| For hirther i | nformation concerning this matter, p  | lease call:       |  |   |
|               | Sonia K. Lowe   | 614               | 462-4701   |   |
|               | Name of Person  | Area Code         | Daytime Telephone  | e Number  |
| Enclosed i    | s a check for the following amount:   |                   |  |   |
| \$125.00 F    | iling Fee S130.00 Filing Fee & Certificate of Status  | Centific          | 0 Filing Fee & cd Copy al copy is enclosed)  | S160.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|               | Mailing Address  New Filing Section  Division of Corporations  P.O. Box 6327  Tallahassee, FL 32314 |                   | Street Address New Filing Section Division of Corporatio Clifton Building 2661 Executive Cente |   |

Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

| The name of the Limited Liability  | Company is:               |                  |   |                     |     |      |
|--|---------------------------|------------------|---|---------------------|-----|------|
| RJ King Investments<br>(Must conta   |                           | Liability Com    | pany, "L.L.C.," or "LLC                   | 2.")                | _   |      |
| ARTICLE II - Address:<br>The mailing address and street add  | dress of the principal of | office of the Li | mited Liability Compan                    | y is:               |     |      |
| <u>Principa</u>  | Office Address:           |                  | <u>Mailin</u>                             | g Address:          |     |      |
| 12110 Sunnydale D<br>Wellington, FL 3341   |                           |                  | 12110 Sunnydale Di<br>Wellington, FL 3341 |                     | _   |      |
| ARTICLE III - Registered Ager<br>(The Limited Liability Company of<br>another business entity with an ac | cannot serve as its owi   | i Registered Ag  |   | te an individual or | 7(  |      |
| The name and the Florida street ac   | ddress of the registere   | d agent are:     |   | •                   | -;  |      |
| Corporation Service Company  |                           |                  |   |                     |     | •    |
| Name   |                           |                  |   |                     |     | • •  |
| 1201 Hays Street   |                           |                  |   |                     | ڣ   | ٠- ' |
|  | Florida street addres     | ss (P.O. Box X   | OT acceptable)                            |                     | (C) |      |
|  | Tallahassee               | FĻ               | 32301                                     |                     |     |      |
|  | City                      | State            | Zip                                       |                     |     |      |
|  |                           |                  |   |                     |     |      |

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..

Corporation Service Company

By Wilson, MY

Registered Agent's Signature (REQUIRED)

(CONTINUED)

| 0.4 1.4 22 23 23 23 24 24 24           |  | Name and Address:   |  |  |
|--|--|---|--|--|
| "AMBR" = Aut<br>"MGR" = Mana           | horized Member   |   |  |  |
| AMBR                                   | gei  | RJ King Investments LLC   |  |  |
|  |  | 12110 Sunnydale Drive   |  |  |
|  |  | Wellington, FL 33414  |  |  |
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| LEV: Effective of                      | late, if other than the date o   | f filing: (OPTIONAL)  |  |  |
| ffective date is list                  | ted, the date must be spec   | ific and cannot be more than five business days prior to or 90 day  |  |  |
| of filing.)                            | d in this blook does not me  | et the applicable statutory filing requirements, this date will not be  |  |  |
| if the date inscree                    | date on the Department of  |   |  |  |
| ument's effective                      | July Critical approximation  |   |  |  |
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| ument's effective<br>LE VI: Other prov | visions, if any.   |   |  |  |
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| LE VI: Other prov                      |  |   |  |  |
|  | IGNATURE:  |   |  |  |
| LE VI: Other prov                      | GNATURE: /s/ Michael Dea   | show on an authorized representative of a member  |  |  |
| LE VI: Other prov                      | GNATURE:  /s/ Michael Dea  Signature of a men  | nber or an authorized representative of a member. d in accordance with section 605.0203 (1) (b), Florida Statutes.              |  |  |
| LE VI: Other prov                      | IGNATURE:  /s/ Michael Dea  Signature of a men This document is executed I am aware that any false i | d in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State |  |  |
| LE VI: Other prov                      | IGNATURE:  /s/ Michael Dea  Signature of a men This document is executed I am aware that any false i | d in accordance with section 605.0203 (1) (b), Florida Statutes.  |  |  |
| LE VI: Other prov                      | IGNATURE:  /s/ Michael Dea  Signature of a men This document is executed I am aware that any false i | d in accordance with section 605.0203 (1) (b), Florida Statutes. information submitted in a document to the Department of State |  |  |

Filing Fees: \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

ARTICLE IV-

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)