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

From:
Account Name : Vcorp SERVICES, LLC
Account Number : I20080000067
Phone : (845)425-0077
Fax Number : (845)818-3588

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

Email Address: _____

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DIVISION OF CORPORATIONS
TALLAHASSEE, FL

FLORIDA LIMITED LIABILITY CO. CT Default Group, LLC

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

DIVISION OF STATE
TALLAHASSEE, FL

2023 NOV -7 PM 4:17

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T. MATTHEWS

NOV -8 2023

FILED**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY****2023 NOV -7 PM 4: 17****ARTICLE I - Name:**

The name of the Limited Liability Company is:

CT Default Group, LLC

(Must contain the words "Limited Liability Company," "L.L.C.," or "LLC.")

CLERY OF STATE
TALLAHASSEE, FL**ARTICLE II - Address:**

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

Principal Office Address:6409 Congress AvenueSuite 100Boca Raton, FL 33487Mailing Address:6409 Congress AvenueSuite 100Boca Raton, FL 33487**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Vcorp Agent Services, Inc.

Name

1200 South Pine Island RoadFlorida street address (P.O. Box **NOT** acceptable)Plantation

City

Florida

State

33324

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.

By: 

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

AMBR

David Schneid

6409 Congress Avenue, Suite 100

Boca Raton, FL 33487

MGR

Garrett Bender

6409 Congress Avenue, Suite 100

Boca Raton, FL 33487

AMBR

Mitchell Gevinson

6409 Congress Avenue, Suite 100

Boca Raton, FL 33487

AMBR

John Crane

6409 Congress Avenue, Suite 100

Boca Raton, FL 33487

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

ARTICLE VI: Other provisions, if any:

REQUIRED SIGNATURE:

Nicole Vasquez

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.

Nicole Vasquez

Typed or printed name of signee

Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

. . .

Brian Weprin – Member

6409 Congress Avenue, Suite 100
Boca Raton FL 33487

Sara Boriskin – Member

6409 Congress Avenue, Suite 100
Boca Raton FL 33487

Jonathan Meisels – Member

6409 Congress Avenue, Suite 100
Boca Raton FL 33487

Justin Carillo – Member

6409 Congress Avenue, Suite 100
Boca Raton FL 33487

Matthew Maltese – Member

6409 Congress Avenue, Suite 100
Boca Raton FL 33487