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To:

Division of Corporations

Fax Number : (850)617-6381

Account Name : RASI

Account Number : I20220000023

Phone : (800)221-2972 Fax Number : (917)243-5843

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

Email Address:

FLORIDA LIMITED LIABILITY CO.

Gladstone Real Estate Consulting Services LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

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

ARTICLE II - Address:

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

333 & Palmetto Park land	333 E. Palmetto Par Cond
Bola Lator, fl 33432	Bota Rondon Ft 32432

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:

Name

Name

Name

Name

Name

No. Box NOT acceptable)

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 us 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 Chopter 605, F.S.

Lawrence Galtone

Registers de Agentis Signature (REQUIRED)

(CONTINUED)

DocuSign Envelope ID: 846CF74C-E31B-4A84-B7D3-65A60B98FFE8

The name and address of each person authoric	zed to manage and control the Limited Liability Company:
Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
Mar	Lawere (- (-ladyton)
-	Dun laton, Fl 32432
-	
-	
-	
(Use attachment if necessary)	
(If an effective date is listed, the date must be specific the date of filing.)	ting: (OPTIONAL) and cannot be more than five business days prior to or 90 days after the applicable statutory filing requirements, this date will not be listed a
ARTICLE VI: Other provisions, if any.	are steedings.
REQUIRED SIGNATURE: LOCUSIGNED by:	Ladstone
Signature of a member This document is executed in I am aware that any false info constitutes a third degree felo	r or an authorized representative of a member, accordance with section 605.0203 (1) (b), Florida Statutes, ornation submitted in a document to the Department of State may as provided for in s.817.155, F.S.
- rayhena	- C- Walt ML pod or printed name of signee

Plling 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)