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To:

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Fax Number : (850)617-6381

From:

Account Name : NELSON MULLINS RILEY & SCARBOROUGH, CORPORATE
Account Number : 120160000074
Phone : (407)839-4277
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Email Address: charlie@staysolara.com

FLORIDA LIMITED LIABILITY CO.

5065 Horseshoe, LLC

Certificate of Status	0
Certified Copy	0
Page Count	05
Estimated Charge	\$125.00

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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION
OF
5065 HORSESHOE, LLC**

The undersigned, acting as the organizer of 5065 Horseshoe, LLC, under the Florida Revised Limited Liability Company Act, Chapter 605, Fla. Stat., adopts the following Articles of Organization:

ARTICLE I - Name:

The name of the limited liability company is 5065 Horseshoe, LLC (the "Company").

ARTICLE II - Address:

The mailing address and street address of the principal office of the limited liability company is 1615 East Lake Drive, Fort Lauderdale, FL 33316.

ARTICLE III - Duration:

The period of duration for the Company shall be perpetual, unless dissolved in accordance with the terms of the Operating Agreement of the Company.

ARTICLE IV - Management:

The Company is to be managed by a Manager. The Manager shall be elected as described in the Operating Agreement of the Company. The name and address of the manager to serve as the initial manager until the first annual meeting of members or until his successor is elected and qualified is:

<u>Name</u>	<u>Address</u>
Charlie Nettlefold	1615 East Lake Drive, Fort Lauderdale FL 33316
Jacobo Hernandez	1615 East Lake Drive, Fort Lauderdale, FL 33316

ARTICLE V - Admission of Additional Members:

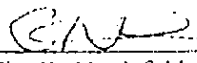
The Company shall admit new Members only in accordance with the Operating Agreement of the Company.

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IN WITNESS WHEREOF, the undersigned Authorized Representative has executed these Articles of Organization as of this 19 day of February, 2024.



Charlie Nettlefold, Authorized Representative

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**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 605.0113, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is 5065 Horseshoe, LLC.
2. The name and address of the registered agent and office is:
Capitol Corporate Services, Inc.
515 East Park Avenue 2nd Fl.
Tallahassee FL 32301

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.

Capitol Corporate Services, Inc.

Kim Tadlock

By: Kim Tadlock, as Asst. Secretary

Dated this 19 day of February, 2024.

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