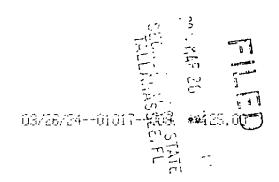
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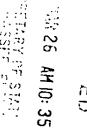
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COVER LETTER

TO:	New Filing Sect Division of Cor							
SUBJEC	Madhouse .	Avanti Legacy Rose	ewood SP	V LLC				
SUBJE	C1	Name	of Limite	d Liabili	ty Company		_	
The enc	losed Articles of	Organization and fe	e(s) are si	ubmitted	for filing.			
Please re	eturn all correspo	ndence concerning	this matte	r to the fo	ollowing:			
	Keith Gloeck	:1						
			1	Name of	Person		<u></u>	
	Chartwell Fir	nancial LLC						
				Firm/Cor	npany			
	915 Chestnut St							
				Addre	SS			
	Clearwater, I	FL 33756						
		_	City	/State and	l Zip Code			
	E	-mail address: (to b	e used for	r future a	nnual report notificati	on)		
For furthe	er information cor	ncerning this matter.	please ca	ıll:			下。 第	(3·
	Vern Landeck	:	727 _at (228-9856	_	28 X X X X X X X X X X X X X X X X X X X	5
	Name	e of Person	Area	Code	Daytime Telephon	e Number		
Enclosed	d is a check for th	e following amount	:					
₩\$125.	.00 Filing Fee	□\$130.00 Filing Certificate of Sta	tus	Certific	.00 Filing Fee & d Copy I copy is enclosed)	Certifica Certified	0 Filing Fee, te of Status & Copy copy is enclosed)	
	New Fi Divisio	<u>e Address</u> ling Section n of Corporations ox 6327		,	Street Address New Filing Section D The Centre of Tallaha 2415 N. Monroe Stre	issee		

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

apany, "L.L.C.," or "LLC.")
imited Liability Company is:
Mailing Address:
915 Chestnut St
Clearwater FL 33756
d Agent's Signature: gent. You must designate an individual or
KOT acceptable)
33756
Zip
for the above stated limited liability company at the registered agent and agree to act in this capacity. For open and complete performance of my duties, and I agent as provided for in Chapter 605, E.S.

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Title: Name and Address: "AMBR" Authorized Member "MGR" - Manager MGR Keith Gloeckl 915 Chestnut St Clearwater, FL 33756 AMBR. Devin Sanderson 915 Chestnut St Clearwater, FL 33756 Vern Landeck 915 Chesinui St <u>AMBR</u> Clearwater, FL 33756 Christina Thornton <u>AMBR</u> 915 Chestnut St Clearwater, FL 33756 (Use attachment if necessary) _. (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing: March 25, 2024 (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: 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

Filing Fces:

ned name of signee

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

constitutes a third degree felony perprovided for in \$17.155, 1/S.

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