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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 · Tallahassee, Florida 32301 (850) 224-8870 · 1-800-342-8062 · Fax (850) 222-1222

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Prospect East, LLC	` -
Please Debit FCA000000003 For: 125	
Thank you Seth Neeley	
Attalia you seth Neeley	Art of Inc. File SS CONTROL STATE ST
	Merger File Art, of Amend. File RA Resignation
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	Cert. Copy Photo Copy
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Mailing Address
New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

New Filing Section Division
The Centre of Tallahassee
2415 N. Monroe Street, Suite \$10
Tallahassee, FL 32303

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liabili	ty Company is:				
PROSPECT EAS	T, LLC				
		Liability Compa	my, "L.L.C.," or "LLC.")		
ARTICLE (I - Address: The mailing address and street a	ddress of the principal c	office of the Lim	ited Liability Company is:		
Princip	al Office Address:		Mailing Address:		
1082 NE 45 S	REET RDALE, FL 33334	-	1082 NE 45 STREET FORT LAUDERDALE, FL	33334	
ARTICLE III - Registered Ag (The Limited Liability Company another business entity with an The name and the Florida street	y cannot serve as its own active Florida registration	Registered Age on.)	igent's Signature: nt. You must designate an individ	SLC/TALLAHASSEE, I	
	GIL H	YATT IV		Or: OSEE	m
		Namo		E S	
		45 STREET		9: 4 FL FL	
	Florida street addres	9 (P.O. Box <u>NO</u>	Tacceptable)	7	
		ERDALE, FL			
	City	State	Zip		
place designated in this certificate further agree to comply with the p	, I hereby accept the approvisions of all statutes no bligations of my position	oiniment as regi elating to the pri as registered ag	the above stated limited liability of the above stated limited liability of the above stated limited liability of the above stated agent and complete performance of the as provided for in Chapter 603 and as provided for linical limited liability of the above stated limited liability of the above stated limited liability of the above stated limited liability of the above stated liability	is capacity. I my duties, and I	

(CONTINUED)

Title: "AMBR" = Authorized Member "MGR" = Manager	Name and Address:
MGR	GIL HYATT IV 1082 NE 45 STREET FORT LAUDERDALE, FL 33334
MGR	GIL HYATT III 1082 NE 45 STREET FORT LAUDERDALE, FL 33334
	
	
Use attachment if necessary)	
IV: Effective date, if other than the detive date is listed, the date must be filling.)	late of filing: (OPTIONAL) specific and cannot be more than five business days prior to or 90
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f filing.) the date inserted in this block does not nent's effective date on the Departme EVI: Other provisions, if any.	ot meet the applicable statutory filing requirements, this date will not ent of State's records.
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V: Effective date, if other than the detive date is listed, the date must be filing.) he date inserted in this block does not tent's effective date on the Departmet. VI: Other provisions, if any. DALL LAWFUL PURPOSES. INCOFREAL ESTATE REQUIRED SIGNATURE: Signature of a This document is exell am aware that any file.	ot meet the applicable statutory filing requirements, this date will not ent of State's records. CLUDING BUT NOT LIMITED TO THE PURCHASE. SALE AND THE PURCHASE OF a member or an authorized representative of a member. Secuted in accordance with section 605.0203 (1) (b), Florida Statutes. This information submitted in a document to the Department of State gree felony as provided for in s.817.155, F.S.