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236 Fast 6th Avenue. Tallahassee, Florida 32303

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		W	ALK IN	
	PICK UP:	-	BROOK 6/27	
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Si	RE HOLDINGS LLC			277
(C	ORPORATE NAME AND DOCUMEN	(T #)		27 E. C.
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	ORPORATE NAME AND DOCUMEN	VT #)		
PECIAL IN	NSTRUCTIONS:			

ARTICLESO	FORGANIZATION FOR	FLORIDA LIMITEI	D LIABILITY COMPANY	
ARTICLE 1 - Name: The name of the Limited Liabili	ity Company is:			
SRE Holdings I, LL	C			
(Must con	tain the words "Limited	Liability Company	, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street a	address of the principal o	ffice of the Limite	1 Liability Company is:	
Princip	oal Office Address:		Mailing Address:	
5201 Congress Aver	nue	520	1 Congress Avenue	
Suite 100		Sui	te 100	
Boca Raton, FL 334	87	Вос	ca Raton, FL 33487	
The name and the Florida street	address of the registered Registered Agent So			
	<u> </u>	Name		
	2894 Remington Gre	en I.n., Ste. A		
	Florida street address (P.O. Box NOT acceptable)			
	Tallahassee	FL	32308	1,562
	City	State	Zip	==
place designated in this certificate further agree to comply with the p	e, I hereby accept the apport provisions of all statutes re bligations of my position	ointment as registed clating to the prope	e above stated limited liability compred agent and agree to act in this car and complete performance of my a as provided for in Chapter 605, F.S.	pacity. I luties, and

Registered Agent's Signature (REQUIRED)

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			
ū			
MGR	Aaron J. Solomon 5201 Congress Avenue, Suite 100		
	Boca Raton, FL 33487	 	
			
	- · · · · · · · · · · · · · · · · · · ·		
	-		
(Use attachment if necessary)			
ARTICLE V: Effective date if other than the c	late 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 afte	er
he date of filing.)		. 3	
Note: If the date inserted in this block does no	ot meet the applicable statutory filing requiremen	ts, this date will not be listed	as
the document's effective date on the Departme	ent of State's records.		<i>:</i> [
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ARTICLE VI: Other provisions, if any.		7	_
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			ال:
REQUIRED SIGNATURE:		1 5	
RECUIRED SIGNATURE:		-	
	(100 M Ton		
Signature of a	member or an authorized representative of a r	memher	
This document is exc	ecuted in accordance with section 605.0203 (1) (b), Florida Statutes.	
I am aware that any f	alse information submitted in a document to the D gree felony as provided for in s.817.155, F.S.		
Angela Zogra	afos		
	Typed or printed name of signee		
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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)