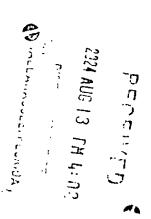


(Requestor's Name)	
(.	Address)	
(.	Address)	
(1	City/State/Zip/Phone #)	· · · · · · · · · · · · · · · · · · ·
PICK-UP	MAIT	MAJL
	Business Entity Name)	
(Document Number)	
Certified Copies	Certificates of	of Status
Special Instructions to F	Filing Officer:	
]

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115 N CALHOUN ST., STE. 4 TALLAHASSEE, FL 32301 P: 866.625.0838 F: 866.625.0839 COGENCYGLOBAL.COM

Account#: 120000000088 If there are any issues please contact Patrice at 850-202-9071

Date:08	/13/2024	
Name:	Patrice Rush	
	2466039	<u></u>
		CRES PROPCO LLC
✓ Articles o	f Incorporation/Authorizat	ion to Transact Business
Amendm	ent	
Change o	of Agent	
Reinstate	ement	
Conversi	on	
☐ Merger		
☐ Dissolution	on/Withdrawal	
Fictitious	Name	
Other		
Authorized Amo	7	
Signature:	(Poll	_

F: +852.2682.9790



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Account#: 120000000088 If there are any issues please contact Patrice at 850-202-9071

Date:_	08/13/2024	
Name:	Patrice Rush	_
Refere	nce #: 2466039	_
Entity N	Name: GREENACR	ES PROPCO LLC
	Articles of Incorporation/Authorization	
	Amendment	
	Change of Agent	
	Reinstatement	
	Conversion	
	Merger	
	Dissolution/Withdrawal	
	Fictitious Name	
	Other	
Authori Signatu	ized Amount: \$125.00	

F: +852.2682.9790

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	Greenad	cres Propco LLC	
(Must cont	ain the words "Limited Lia	bility Company, "L.L	.C.," or "LLC.")
ARTICLE II - Address:			
he mailing address and street a	ddress of the principal offic	ce of the Limited Liab	ility Company is:
<u>Princip</u>	al Office Address:		Mailing Address:
770 G	oodlette Rd N		770 Goodlette Rd N
Naple	es, FI 34102	-	Naples, Fl 34102
RTICLE III - Registered Ag	ent, Registered Office, &	gistered Agent. You r	iignature:
ARTICLE III - Registered Ag The Limited Liability Company mother business entity with an a	ent, Registered Office, & cannot serve as its own Reactive Florida registration.)	egistered Agent. You r	iignature:
ARTICLE III - Registered Ag The Limited Liability Company another business entity with an a	ent, Registered Office, & cannot serve as its own Reactive Florida registration.) address of the registered ag	egistered Agent. You r	iignature:
ARTICLE III - Registered Ag The Limited Liability Company another business entity with an a	ent, Registered Office, & cannot serve as its own Reactive Florida registration.) address of the registered ag	egistered Agent. You r	iignature:
ARTICLE III - Registered Ag The Limited Liability Company another business entity with an a	ent, Registered Office, & cannot serve as its own Reactive Florida registration.) address of the registered ag	egistered Agent. You r gent are: gency Global Inc.	ignature: nust designate an individu
ARTICLE III - Registered Ag The Limited Liability Company nother business entity with an a	ent, Registered Office, & cannot serve as its own Reactive Florida registration.) address of the registered ag	egistered Agent. You r gent are: gency Global Inc. Name Calhoun Street, Sui	iignature: must designate an individu
ARTICLE III - Registered Ag The Limited Liability Company mother business entity with an a	ent, Registered Office, & cannot serve as its own Reactive Florida registration.) address of the registered ag Cog N 115 North	egistered Agent. You r gent are: gency Global Inc. Name Calhoun Street, Sui	iignature: nust designate an individu

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 as provided for in Chapter 605, F.S.

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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 AMBR Greenacres Holdco LLC 770 Goodlette Rd N Naples, Fl 34102 MGR Greenacres Holdco LLC 770 Goodlette Rd N Naples, FI 34102 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date 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 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 constitutes a third degree felony as provided for in s.817.155, F.S. ANGELA HUBER Typed or printed name of signee

Filing Fees:

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

\$ 30.00 Certified Copy (Optional)

ARTICLE IV-

S 5.00 Certificate of Status (Optional)