Division of Corporations

Florida Department of State Division of Corp nie 'Ili

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6381

From:

Account Name : COMPUTERSHARE Account Number: 110432003053 : (561)694-8107 Phone Fax Number ; (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email	Address:			
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FLORIDA LIMITED LIABILITY CO.

952 Jupiter Park Property Owner, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLESOF ORGANIZATION FOR EXAMIN	A CANTILLE TANBELL I COMMINIST
ARTICLE I - Name:	
The name of the Limited Liability Company is:	
952 Jupiter Park Property Owner, LLC	
(Must contain the words "Limited Liability	Company, "L.L.C.," or "LLC.")
	• •
ARTICLE II - Address:	
The mailing address and street address of the principal office of	the Limited Liability Company is:
Pointing LOSS and down	\$4 - 11t 4 - 4 - 4
Principal Office Address:	Mailing Address:
2141 S Alternate A1A, Suite 440	2141 S Alternate A1A, Suite 440
Jupiter, FL 33477	Jupiter, FL 33477
ARTICLE III - Registered Agent, Registered Office, & Regi	
(The Limited Liability Company cannot serve as its own Registo another business entity with an active Florida registration.)	red Agent. You must designate an individual or
another business entity with an active ribrida registration.)	
The name and the Florida street address of the registered agent a	ire:
The mine and the Contact State	
Eric M. Levitt	
Name	
2141 S Alternate A1A, Suite	: 440

Florida street address (P.O. Box NOT acceptable)

am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S.,

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

Registered Agent's Signature (REQUIRED)

(CONTINUED)

64 :8 NA 11 438 \$2

ARTICLE IV-

	Title: "AMBR" = Authorized Men	Name and Address:
	"MGR" = Manager	noer
	MGR	Eric M. Leviu 2141 S Alternate A1A, Suite 440 Jupiter, FL, 33477
	(Use attachment if necessary	r)
(If an ei the date <u>Note:</u>	LE V: Effective date, if other tefective date is listed, the date of filing.) If the date inserted in this block	than the date of filing:
(If an et the date <u>Note:</u> the doc	LE V: Effective date, if other tefective date is listed, the date of filing.) If the date inserted in this block	than the date of filing:
(If an et the date <u>Note:</u> the doc	LE V: Effective date, if other to fective date is listed, the date of filing.) If the date inserted in this blocument's effective date on the late VI: Other provisions, if any	than the date of filing: (OPTIONAL) must be specific and cannot be more than five business days prior to or 90 days after k does not meet the applicable statutory filing requirements, this date will not be listed as Department of State's records.
(If an et the date <u>Note:</u> the doc	LE V: Effective date, if other of fective date is listed, the date of filing.) If the date inserted in this blocument's effective date on the line. LE VI: Other provisions, if any REOUIRED SIGNATURE Signal This document is am aware to	than the date of filing: (OPTIONAL) must be specific and cannot be more than five business days prior to or 90 days after k does not meet the applicable statutory filing requirements, this date will not be listed as Department of State's records.

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)

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