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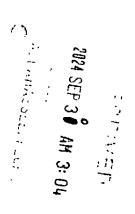
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## WALK IN

	PICK	UP: <u>JENA 9/30</u>	
	CERTIFIED COPY		
XX	РНОТОСОРУ		
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1.	4TRO DELRAY LLC (CORPORATE NAME AND DOC	DMFNT #)	30
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	(CORPORATE NAME AND DOC	UMENT#)	
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SPECIAI	LINSTRUCTIONS:		
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	4TRO Delra	ay LLC	
(Must	conatin the words "Limited Liability	Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and str	eet address of the principal office of	the Limited Liability Company is:	
<u>Pri</u>	ncipal Office Address:	Mailing Address:	
2125 Biscayr	e Blvd, Ste. 261	2125 Biscayne Blvd, Ste. 261	
Miami, FL 33	137	Miami, FL 33137	
	l Agent, Registered Office, & Regis		
(The Limited Liability Com another business entity with		red Agent. You must designate an individual or	
(The Limited Liability Com another business entity with	pany cannot serve as its own Registe an active Florida registration.)	red Agent. You must designate an individual or re:	
(The Limited Liability Com another business entity with	pany cannot serve as its own Registen an active Florida registration.)  Treet address of the registered agent a	red Agent. You must designate an individual or re:	
(The Limited Liability Com another business entity with	pany cannot serve as its own Register an active Florida registration.)  Treet address of the registered agent a MUGDOCK DEVELOPME	red Agent. You must designate an individual or re: NT, LLC	
(The Limited Liability Com another business entity with	pany cannot serve as its own Register an active Florida registration.)  Treet address of the registered agent a  MUGDOCK DEVELOPME  Name	red Agent. You must designate an individual or re: NT, LLC e. 261	ELEVITA STA
(The Limited Liability Com another business entity with	pany cannot serve as its own Register an active Florida registration.)  Treet address of the registered agent a MUGDOCK DEVELOPME Name  2125 Biscayne Blvd, St	red Agent. You must designate an individual or re: NT, LLC e. 261	

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..

MUGDOCK DEVELOPMENT, LLC

By /s/ Jerad Graham

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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.1	D.	 ( )		TV.	٠.

The name and address of each person authorized to manage and control the Limited Liability Company:

n effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 cate of filing.)			Name and Address:			
(Use attachment if necessary)  ICLE V: Effective date, if other than the date of filing:  offective date is listed, the date must be specific and cannot be more than five business days prior to or, 90 ate of filing.)  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not locument's effective date on the Department of State's records.  ICLE VI: Other provisions, if any.    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.  Jerad Graham						
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$30.00 Certified Copy (Optional)

- \$ 5.00 Certificate of Status (Optional)