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From:

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Account Number : 120000000085

Phone : (561)626-4742 Fax Number : (561)626-4742

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

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FLORIDA LIMITED LIABILITY CO. Grassy Point Holdings 2, LLC

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	COY	VER LETTER	
	r Filing Section ision of Corporations	. :.	
SUBJECT:	Grassy Point Holdings 2, LLC		
JOSHLOTT.	Name of Lim	ited Liability Company	
The enclosed	Articles of Organization and fec(s) are	submitted for filing.	
Please return	all correspondence concerning this ma	tter to the following:	
N	Aichael S. Singer		
_		Name of Person	
·	Comiter, Singer, Baseman & Braun, LL	.P	
	-	Firm/Company	
	825 PGA Blvd., Suite 701	, , , , , , , , , , , , , , , , , , ,	
	······································	Address	
P	alm Beach Gardens, FL 33410		
_		ty/State and Zip Code	
<u>co</u>	rporate@comitersinger.com F-mail address: (10 he used	for future annual report notification	nr)
For firsther info	ormation concerning this matter, please	·	,
	cbccca Byers 56)	
	Name of Person Ar	ea Code Daytime Telephone	Number
Fig. Enclosed is a	check for the following amount:	, .	
□\$125.00 Fi	iling Fee S130.00 Filing Fee & Certificate of Status	■\$155.00 Filing Fee & Certified Copy , (additional copy is enclosed)	☐S160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
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Division of Corporations
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Tallahassee, FL 32314

New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

£60, 20 - 102 - 100 1 10/07 - 9/21 AC

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50 a. a	ARTICLES OF ORCANIZATION FOR FI	LORIDA LI	MITED LIABILITY COMPANY
RTICLE	- Name:		
he name of t	he Limited Liability Company is:		
	D : ••••		•
<u>G</u> 1	assy Point Holdings 2, LLC		
	(Must contain the words "Limited Li	iability Cor	apany, "L.L.C" or "LLC.")
ARTICLE II			
he mailing a	ddress and street address of the principal off	ice of the L	imited Liability Company is:
	Principal Office Address:		Mailing Address:
56	0 NW Enterprise Drive		560 NW Enterprise Drive
Po	rt St. Lucie, FL 34986		Port St. Lucic, FL/34986
		_	
	Comiter, Singer, Basen	nan & Brat	n. LLP
	V	Name	
	3825 PGA Blvd., Suite	701	
	Florida street address (P.O. Box N	OT acceptable)
	Palm Beach Gardens	FL	33410
	City	State	∠ Zip
ce aesignatea Ther agree to	I in this certificate, I hereby accept the appoin	ting to the	for the above stated limited liability company at the gistered agent and ugree to act in this capacity. I troper and complete performance of my duties, and I tigent as provided for in Chapter 605, F.S
	Registere	a Agent's S	Signature (REQUIRED)

(CONTINUED)

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AMB	t" = Authorized Membe	Name and Address:
	= Manager	
MGR		Kenneth Geremia, Jr.
-	<u> </u>	560 NW Enterprise Drive
		Port St. Lucie, FL 34986
MGR		Jennifer S. Geremia
		560 NW Enterprise Drive
		Port St. Lucic, FL 34986
		• • •
		• • •
	<u></u>	
		<u></u>
(Use att	achment if necessary)	
	•	a the date of filing: (OPTION AL)
C LE V : Ef	fective date, if other than	o the date of filing:
CLE V: Ef	fective date, if other than	the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days prior to or 90 da
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CLE V: Effective de e of filing. If the date cument's e	fective date, if other than the is listed, the date mu inserted in this block diffective date on the Dep ther provisions, if any. RED SIGNATURE: Signature This document I am aware that	e of a member or an authorized representative of a member, is executed in accordance with section 605.0203 (1) (b), Florida Statutes.

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

\$ 30.00 Certified Copy (Optional)
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