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(City/State/Zip/Phone #)

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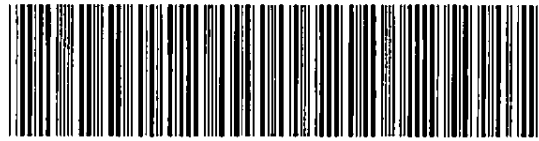
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CLERK OF STATE
TALLAHASSEE, FL 32399

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GOLAN | CHRISTIE | TAGLIA

GOLAN CHRISTIE TAGLIA LLP
70 WEST MADISON STREET
SUITE 1500
CHICAGO, ILLINOIS 60602-4206
PHONE (312) 263-2300
FAX (312) 263-0939
GCT LAW

Amanda Parmer
aparmer@gct.law

February 4, 2025

Via FedEx

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

Re: 1515 Princeton LLC – Articles of Organization for Florida Limited Liability Company

To Whom It May Concern:

In connection with 1515 Princeton LLC, enclosed, for filing, are the Articles of Organization. Also enclosed, is a check made payable to the Florida Department of State in the amount of \$125 to cover the cost associated with filing the Articles of Organization. Once complete, please forward the filed-stamped document to me via email at aparmer@gct.law or in the enclosed self-addressed envelope.

Should you have any questions, please do not hesitate to contact me.

Very truly yours,

GOLAN CHRISTIE TAGLIA LLP


Amanda Parmer
Paralegal

Enclosure

COVER LETTER

TO: New Filing Section
Division of Corporations

SUBJECT: 1515 PRINCETON LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

AMANDA PARMER

Name of Person

GOLAN CHRISTIE TAGLIA LLP

Firm/Company

70 W. MADISON STREET, STE 1500

Address

CHICAGO, ILLINOIS 60602

City/State and Zip Code

APARMER@GCT.LAW

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

AMANDA PARMER

312

696-1354

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$125.00 Filing Fee

☐ \$130.00 Filing Fee &
Certificate of Status

☐ \$155.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$160.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address

New Filing Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address

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

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

1515 PRINCETON 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:

Principal Office Address:

855 KETCH DRIVE

UNIT 307

NAPLES, FLORIDA 34103

Mailing Address:

855 KETCH DRIVE

UNIT 307

NAPLES, FLORIDA 34103

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

The name and the Florida street address of the registered agent are:

COGENCY GLOBAL INC.

Name

115 N. CALHOUN STREET, STE 4

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

TALLAHASSEE

FLORIDA

32301

City

State

Zip

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..

/s/ Kathie M Fleck Assistant Secretary

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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TALLAHASSEE, FLORIDA

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ARTICLE IV-

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

Title:

"AMBR" = Authorized Member

"MGR" = Manager

Name and Address:

JULIE A. DONLON

MGR

855 KETCH DRIVE

UNIT 307

NAPLES, FLORIDA 34103

JOSEPH M. DONLON

MGR

855 KETCH DRIVE

UNIT 307

NAPLES, FLORIDA 34103

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

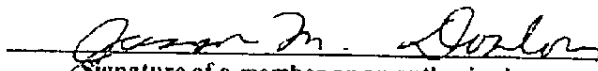
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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:

SIGN HERE



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.

Joseph M. Donlon

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)

\$ 5.00 Certificate of Status (Optional)