

CORPORATION INFORMATION  
SERVICES, INC.  
1201 HAYS STREET  
TALLAHASSEE, FL 32301  
904-222-9171  
904-222-0191 FAX

800-342-8086

**csc networks**

MAIL TO:  
P.O. Box 50218  
TALLAHASSEE, FL 32314

ACCOUNT NO. : 0721000000032

REFERENCE : 513737 81606A

AUTHORIZATION :

COST LIMIT : 0 PREPAID

ORDER DATE : December 28, 1994

ORDER TIME : 9:41 AM

ORDER NO. : 513737

CUSTOMER NO: 81606A

CUSTOMER: Mr. Christy Banfield  
KEITH MACK LEWIS COHEN &  
LUMPKIN, P.A.  
20th Floor  
200 South Biscayne Boulevard  
Miami, FL 33131

DOMESTIC FILING

NAME: COURTVIEW SQUARE, L.C.

XX ARTICLES OF ORGANIZATION  
CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
PLAIN STAMPED COPY  
COMMUNICATIONS BOARD STANDING

CONTACT PERSON: Mr. D. Schroder

EXAMINER'S INITIALS:

FILED  
95 JAN -3 PM 3:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

RECEIVED  
95 JAN -3 AM 11:22  
DEPT. OF CORPORATION

EFFECTIVE DATE:  
1-20-95

RECEIVED

\* One of the managing members, Capital Holdings, Inc.  
is not registered with the Secretary of State

ARTICLES OF ORGANIZATION  
OF  
COURTVIEW SQUARE, L.C.  
a Limited Liability Company

EFFECTIVE DATE  
12-27-99  
FILED  
95 JAN -3 PM 3:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned individual, being either a member or the authorized representative of a member, hereby presents these Articles of Organization to the Secretary of State of the State of Florida for the formation of a Limited Liability Company under the laws of the State of Florida.

ARTICLE I.

The name of the Limited Liability Company is:

COURTVIEW SQUARE, L.C.

ARTICLE II.

- A. This Limited Liability Company is to exist until December 31, 2024.
- B. The existence of this Limited Liability Company shall commence on the date these Articles are executed.

ARTICLE III.

The name of the initial registered agent and the street address of the initial registered office are as follows:

<u>Registered Agent</u>	<u>Address of Registered Office</u>
Key Corporate Services, Inc.	200 South Biscayne Boulevard 20th Floor Miami, Florida 33131

ARTICLE IV.

The initial Regulations shall be adopted by the Members. Thereafter, the power to alter, amend, or repeal the Regulations shall be vested in the members of the Limited Liability Company in the manner set forth in the Regulations.

ARTICLE V.

The Regulations of this Limited Liability Company contain provisions regarding:

- A. The rights of the members to admit additional members and the terms and conditions of the admissions;
- B. The rights of the remaining members of this Limited Liability Company to continue the business of this Limited Liability Company on the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member, and any other event which terminates the continued membership of a member in this Limited Liability Company are set forth in the Regulations of this Limited Liability Company.

ARTICLE VI.

The mailing address and the street address of the principal office of this Limited Liability Company shall be as follows:

Street Address

9200 South Dadeland Blvd.  
Suite 609  
Miami, Florida 33156

Mailing Address

9200 South Dadeland Blvd.  
Suite 609  
Miami, Florida 33156

ARTICLE VII.

The business of this Limited Liability Company is to be managed by the Members. The name and street address of the Managing Members, are as follows:

Name

EquityLine Financial Group, Inc.

Capital Holdings LLC

Street Address

9200 South Dadeland Boulevard  
Suite 609  
Miami, Florida 33156

85 Buckingham Street  
Hartford, Connecticut 06106

IN WITNESS WHEREOF, the undersigned has hereunto executed these Articles of Organization this 27<sup>th</sup> day of December, 1994, at Miami, Florida.

  
\_\_\_\_\_  
EDGAR LEWIS

HAVING BEEN NAMED TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE-STATED LIMITED LIABILITY COMPANY, AT THE PLACE DESIGNATED IN THIS CERTIFICATE, THE UNDERSIGNED AGREES TO ACT IN THIS CAPACITY, AND FURTHER AGREES TO COMPLY WITH THE PROVISIONS OF ALL STATUTES RELATIVE TO THE PROPER AND COMPLETE PERFORMANCE OF ITS DUTIES.

KEY CORPORATE SERVICES, INC.

By:   
\_\_\_\_\_  
(Edgar Lewis, President

Date: 12/27/94

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS  
OF  
COURTVIEW SQUARE, L.C.

STATE OF FLORIDA    )  
                              ) ss:  
COUNTY OF DADE    )

BEFORE ME, the undersigned, personally appeared Edgar Lewis, who, upon being duly sworn, certified as follows:

1. He is the Attorney and authorized representative for Equityline Financial Group, Inc., a Florida corporation (the "Corporation");
2. Equityline Financial Group, Inc., and Capital Holdings LLC, a Connecticut limited liability company, are the members of Courtview Square, L.C.;
3. Courtview Square, L.C. is a Limited Liability Company which has at least two (2) members;
4. The amount of cash to be contributed by all of the members is \$10,000;
5. A description and agreed upon value of property contributed by the members is as follows:

<u>Description</u>	<u>Agreed Upon Value</u>
None	None

6. No additional cash to be contributed by any of the members.
7. A description and agreed upon value of additional property to be contributed by the members is as follows:

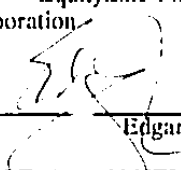
<u>Description</u>	<u>Agreed Upon Value</u>
None	None

FURTHER AFFIANT SAYETH NOT.

Under penalties of perjury, I declare that I have read the foregoing and that the facts alleged are true to the best of my knowledge and belief.

EquityLine Financial Group, Inc., a Florida  
corporation

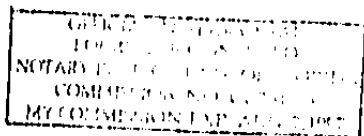
Date: DECEMBER 27, 1994

By:   
Edgar Lewis, Attorney-in-fact

(ACKNOWLEDGMENT APPEARS ON NEXT PAGE)

STATE OF FLORIDA     )  
                                  ) 881  
COUNTY OF DADE     )

The foregoing instrument was acknowledged before me this 27<sup>th</sup> day of December, 1994, by Edgar Lewis, Attorney-in-Fact for EquityLine Financial Group, Inc., a Florida corporation, on behalf of the corporation. He is (check one) ☒ personally known to me or ☐ has produced a \_\_\_\_\_ as identification.



Lourdes B. Cinquero  
(Signature of Person Taking Acknowledgment)  
LOURDES B. CINQUERO  
(Name of Acknowledger Typed, Printed or Stamped)  
\_\_\_\_\_  
(Title or Rank)  
\_\_\_\_\_  
(Serial Number, if any)

Notary Public, State of Florida


My Commission Expires:

**FILE**

Fee after May 1, will be \$263.75

APPROVED  
AND  
FILED

95 FEB 22 AM 8:08

<b>LIMITED LIABILITY COMPANY</b> <b>ANNUAL REPORT</b> <b>1995</b>		 <b>FLORIDA DEPARTMENT OF STATE</b> Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS	
<b>FILING FEE</b> <b>\$ 238.75</b>		Annual Report \$100.00 + \$138.75 Corporation Supplemental Fee <b>Make Check Payable To: FLORIDA DEPARTMENT OF STATE</b>	
<b>1. Name and Mailing Address of Limited Liability Company</b> <b>DOCUMENT # L95000000006</b> COURTVIEW SQUARE, L.C. 9200 SOUTH DADELAND BLVD SUITE 609 MIAMI FL 33156		<b>1a. Principal Place of Business Address</b> 9200 SOUTH DADELAND BLVD SUITE 609 MIAMI FL 33156	
If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2			
<b>2. Mailing Address</b> Suite, Apt. #, etc. City & State Zip		<b>2a. Principal Place of Business</b> Suite, Apt. #, etc. City & State Zip	
<b>3. Date Organized or Qualified</b> 12/27/1994		<b>3a. State of Formation</b> FL	
<b>4. FEI Number</b> 65-0554174		<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable	
<b>5. Date of Last Report</b>		<b>6. Certificate of Status Desired</b> <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
<b>7. Name and Address of Current Registered Agent</b> KEY CORPORATE SERVICES, INC. 200 SOUTH BISCAYNE BLVD. 20TH FLOOR MIAMI FL 33131		<b>8. Name and Address of New Registered Agent</b> Name Street Address (P.O. Box Number is Not Acceptable) Suite, Apt. #, etc. City State Zip Code	
9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations			
SIGNATURE _____		DATE _____	
10. Title Managing Members Managers Business Street Address City, State and Zip Code			
MGRM	EQUITYLINE FINANCIAL G	9200 SOUTH DADELAND BLVD S	MIAMI FL
MGRM	CAPITAL HOLDINGS LLC,	35 BUCKINGHAM STREET	HARTFORD CT
11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10 or on an attachment with an address.			
<b>SIGNATURE:</b> <i>MANAGING Member</i> <i>Robert C. S. [Signature]</i> 1/25/95 35 62 4760			

FILE

Fee after May 1, will be \$263.75

APPROVED  
AND  
FILED

95 FEB 22 AM 8:00

SECRETARY OF STATE  
TALLAHASSEE, FLORIDALIMITED LIABILITY COMPANY  
ANNUAL REPORT  
1995FLORIDA DEPARTMENT OF STATE  
Sandra B. Morham  
Secretary of State  
DIVISION OF CORPORATIONSFILING FEE  
\$ 230.75

Annual Report \$100.00 + \$130.75 Corporation Supplemental Fee

Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address  
of Limited Liability Company

DOCUMENT # L95000000006

COURTVIEW SQUARE, L.C.  
9200 SOUTH DADELAND BLVD  
SUITE 609  
MIAMI FL 33156

1a. Principal Place of Business Address

9200 SOUTH DADELAND BLVD  
SUITE 609  
MIAMI FL 33156

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2

2. Mailing Address

Suite, Apt. #, etc.

City &amp; State

Zip

Country

2a. Principal Place of Business

Suite, Apt. #, etc.

City &amp; State

Zip

Country

3. Date Organized or Qualified

12/27/1994

3a. State of Formation

FL

4. FET Number

65-0554174

☐ Applied For☐ Not Applicable

5. Date of Last Report

6. Certificate of Status Desired

30.75 Additional Fee Required ☒

7. Name and Address of Current Registered Agent

KEY CORPORATE SERVICES, INC.  
200 SOUTH BISCAYNE BLVD.  
20TH FLOOR  
MIAMI FL 33131

8. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

FL

Zip Code

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE

DATE

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	EQUITYLINE FINANCIAL G	9200 SOUTH DADELAND BLVD S	MIAMI FL
MGRM	CAPITAL HOLDINGS LLC,	35 BUCKINGHAM STREET	HARTFORD CT

000001413560  
-02/23/95--01082--017  
\*\*\*247.50 \*\*\*247.50

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10 or on an attachment with an address.

SIGNATURE:

MANAGING MEMBER  
Robert C. Guehman

1/25/95 305 62 9760

FILE NOW: Fee after May 1, will be \$263.75

L9500000006  
LIMITED LIABILITY COMPANY  
ANNUAL REPORT  
1996  
FLORIDA DEPARTMENT OF STATE  
Section of Statutes  
DIVISION OF CORPORATIONS

96 FEB 22 PM 1:36

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILING FEE \$238.75  
Annual Report \$100.00 + \$138.75 Corporation Supplemental Fee  
Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address of Limited Liability Company  
DOCUMENT #L95000000006

COURTVIEW SQUARE, L.C.  
9200 SOUTH DADELAND BLVD  
SUITE 609  
MIAMI FL 33156

1a. Principal Place of Business Address  
9200 SOUTH DADELAND BLVD  
SUITE 609  
MIAMI FL 33156

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a

2. Principal Place of Business		2a. Mailing Address		3. Date Organized or Qualified	3a. State of Formation
Suite, Apt. #, etc		Suite, Apt. #, etc		12/27/1994	FL
City & State		City & State		4. FET Number	<input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
Zip		Zip		65-0554174	
Country		Country		5. Date of Last Report	6. Certificate of Status Desired
				02/22/1995	<input type="checkbox"/> As Is Additional Fee Required

7. Name and Address of Current Registered Agent

KEY CORPORATE SERVICES, INC.  
200 SOUTH BISCAYNE BLVD.  
20TH FLOOR  
MIAMI FL 33131

8. Name and Address of New Registered Agent

Name  
Street Address (P.O. Box Number is Not Acceptable)  
Suite, Apt. #, etc  
City  
500001723625  
-02/26/96--01016--014  
\*\*\*\*238.75\*\*\*\*238.75  
FL

9. Pursuant to the provisions of Sections 608.416 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. I hereby accept the appointment as registered agent, and accept the obligations.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
(Registered Agent Accepting Appointment) (FOTI Registered Agent signature required when remaining)

10. Title	Managing Members/Managers	Business Street Address	City, State and Zip Code
MGRM	EQUITYLINE FINANCIAL G	9200 SOUTH DADELAND BLVD S	MIAMI FL
MGRM	CAPITAL HOLDINGS LLC,	85 BUCKINGHAM STREET	HARTFORD CT
		2/23/96 aw	

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SIGNATURE: \_\_\_\_\_ ROBERT E. SPIELMAN 2/16/96 (305)670-9700