

1201 PAYS STREET
TALLAHASSEE, FL 323
904-711-1111
904-711-1111 FAX

800-343-8086



L9500000610

ACCOUNT NO. : 072100000032

REFERENCE : 655738 86901D

AUTHORIZATION :

COST LIMIT : 285.00

Patricia Pyzik

ORDER DATE : August 8, 1995

ORDER TIME : 11:36 AM

ORDER NO. : 655738

CUSTOMER NO: 86901D

300001555223
4100001555224

CUSTOMER: Mr. Leif A. Tonnessen
PRENTICE HALL LEGAL &
FINANCIAL SERVICES
375 Hudson Street

New York, NY 10014

DOMESTIC FILING

NAME: JLM GROVES, L.C.

ARTICLES OF INCORPORATION
XXX CERTIFICATE OF LIMITED LIABILITY

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

 CERTIFIED COPY
XX PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Jeanine Prezeau

EXAMINER'S INITIALS: T. BROWN AUG - 9 1995

FILED
95 AUG - 8 AM 8:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED
LIABILITY COMPANY**

ARTICLE I - Name:

The name of the limited liability company is: JLM GROVES, L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 6775 Silver Star Road, Orlando, Florida 32818.

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be until July 31, 2020.

ARTICLE IV - Management:

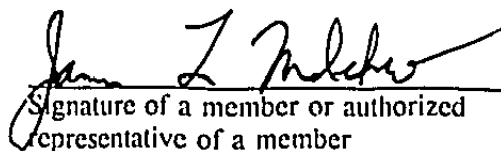
The Limited Liability Company is to be managed by the members and the names and addresses of the managing members are: James L. Melcher, 1185 Avenue of the Americas, 32nd Floor, New York, NY 10036; and April Benasich, 210 West 90 Street, #6D, New York, NY 10024.

ARTICLE V - Admission of Additional Members:

The right, if given, of the remaining members to admit additional members and the terms and conditions of the admissions shall be as set forth in the Operating Agreement as such Agreement may be amended from time to time.

ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be as set forth in the Operating Agreement as such Agreement may be amended from time to time.



Signature of a member or authorized
representative of a member

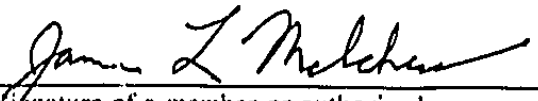
(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of JLM Groves, L.C., deposes and says:

1. the above named limited liability company has at least two members.
2. the total amount of cash contributed by the members is \$51,000.00
3. if any, the agreed value of property other than cash contributed by members is \$-0-. A description of the property is attached and made a part hereto.
4. the total amount of cash and property anticipated to be contributed by members is \$51,000. This total includes amounts from 2 and 3 above.



Signature of a member or authorized
representative of a member

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

FILED
95 AUG -8 AM 8:59
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA

1. The name of the limited liability company is: JLM GROVES, L.C.
2. The name and address of the registered agent and office is:

Corporation Service Company
1201 Hays Street
Tallahassee, Florida 32301

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.

Corporation Service Company

Laura R. Dunlap

(Signature)

August 8, 1995

(Date)

It's Agent, Laura R. Dunlap

APPLICATION FOR
REINSTATEMENT FOR
LIMITED LIABILITY COMPANY



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

FILED

96 NOV 15 PM 3:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Make Check Payable To: FLORIDA DEPARTMENT OF STATE

1. Name and Mailing Address
of Limited Liability Company

DOCUMENT # L95000000610

JLM Groves, L.L.C.
6775 Silver Star Road
Orlando, FL 32818

1a. Principal Place of Business Address

6775 Silver Star Road
Orlando, FL 32818

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

2. Mailing Address

2a. Principal Place of Business

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

3. Date Organized or Qualified

3a. State of Formation

08/08/1995

4. FEI Number

59-3346154

☐ Applied For

☐ Not Applicable

5. Date of Last Report

6. Certificate of Status Desired

☒ Additional Fee Required

7. Name and Address of Current Registered Agent

8. Name and Address of New Registered Agent

Corporation Service Company
1201 Hay Street
Tallahassee, FL 32301

Name

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

Suite, Apt. #, etc.

000002011540--8

City

-11/21/96--01089--001

****747.50

FL

9. I, being appointed the registered agent of the above named limited liability company, am familiar with and accept the obligations of Chapter 608, F.S.

Signature of
Registered Agent

Karen B. Rozar

Date

11-14-96

10. Title

Managing Members Manager

Business Street Address

City, State & Zip Code

MGRM

Melcher, James

1185 Avenue of the Americas

New York, NY 10036

MGRM

Benasich, April

210 West 90th Street

New York, NY 10024

REINSTATEMENT

9611-18-96

11. I certify that I am managing member/manager or the receiver or trustee empowered to execute this application as provided for in chapter 608, F.S. I further certify that when filing this reinstatement application the reason for dissolution has been eliminated, the limited liability company name satisfies the requirements of section 608.406, F.S., and that all fees owed by the limited liability company have been paid. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

Signature of
Managing Member/Manager

James Z. Melcher

Date 10/22/96

Daytime Phone # (212) 768-9000

Typed or printed name of signing Managing Member/Manager