

Florida Department of State

Division of Corporations

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To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : CAPITOL SERVICES, INC.
Account Number : 120160000017
Phone : (855)498-5500
Fax Number : (800)432-3622

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FLORIDA LIMITED LIABILITY CO.
CFLP RABUN INVESTMENTS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

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**ARTICLES OF ORGANIZATION
FOR
CFLP RABUN INVESTMENTS, LLC**

ARTICLE 1. - NAME:

The name of this Limited Liability Company ("Company") shall be:

CFLP RABUN INVESTMENTS, LLC

ARTICLE 2. - ADDRESS

The mailing address and street address of the principal office of the Company is:

7480 SW 40TH STREET, SUITE 700, MIAMI, FLORIDA 33155.

ARTICLE 3. - DURATION

The period of duration for the Company shall be perpetual unless dissolved according to

ARTICLE 4. - MANAGEMENT

The Company is to be managed by: a manager or managers and the name(s) and address of such managers is:

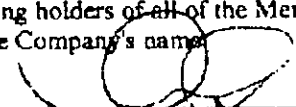
Maurice Cayon
7480 SW 40TH STREET, SUITE 700
MIAMI, FLORIDA 33155

ARTICLE 5. - ADMISSION OF ADDITIONAL MEMBERS

The right of the members to admit additional members and the terms and conditions of the admissions shall be: new members may be admitted from time to time and upon such terms and conditions as shall be determined by a unanimous vote of the holders of all of the Membership Interests.

ARTICLE 6. - MEMBERS RIGHTS TO CONTINUE BUSINESS

The right of the members of the 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 continual membership of a member in the Company shall be: determined by a unanimous vote of the remaining holders of all of the Membership Interests to continue to conduct the business of the Company under the Company's name



Signature of a member or an authorized representative of a member
(In accordance with section 605, 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 FL

H24000237450

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

PURSUANT TO THE PROVISIONS OF SECTION 605, FLORIDA STATUTES, THE
UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT
TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF
FLORIDA.

1. THE NAME OF THE LIMITED LIABILITY COMPANY IS:

CFLP RABUN INVESTMENTS, LLC

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

MAURICE CAYON
Name

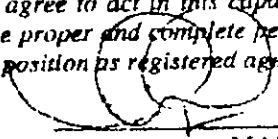
7480 SW 40TH STREET, SUITE 700

Florida street address

MIAMI, FLORIDA 33155

CITY, STATE AND 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.



MAURICE CAYON

2024 JUL 12 PM12:44
SECRETARY OF STATE
TALLAHASSEE, FL

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CFLP RABUN INVESTMENTS, LLC

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

H24000237450

MAURICE CAYON
Name

7480 SW 40TH STREET, SUITE 700

Florida street address

MIAMI, FLORIDA 33155

CITY, STATE AND 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.

MAURICE CAYON

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