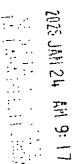


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Office Use Only







Sunshine State Corporate Compliance Company

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COVER LETTER

	New Filing Sec Division of Co				
SUBJEC	Proprius,	LLC			
SUBJEC	· · · · · · · · · · · · · · · · · · ·	Na	me of Limited Li	ability Company	
The encl	osed Articles of	Organization and	l fee(s) are submi	tted for filing.	
Please re	turn all corresp	ondence concerni	ng this matter to t	he following:	
	Sarah A. Wa	aring			[2] [3] [4]
			Name	e of Person	
			Firm	/Company	
	10851 Tiber	io Drive			
			A	ddress	
	Fort Myers,	Florida 33913			
			City/State	e and Zip Code	
		00@gmail.com	a ha wand for fire	re annual report notificat	Pian)
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For further	information co	ncerning this mat	ter, please call:		
	Brian F. Atte	a, Esq.	716 at (648-7000 x. 205	
	Nam	ne of Person	Area Cod		
Enclosed	is a check for t	he following amo	unt:		
□\$125.0	00 Filing Fee	□\$130.00 Fili Certificate of \$	Status /e	(155.00 Filing Fee & rifled Copy ional copy is enclosed)	☐\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
		ng Address		Street Address	
		iling Section on of Corporation	e	New Filing Section D The Centre of Tallah	
		on of Corporation fox 6327	3	2415 N. Monroe Stre	
		assee, FL 32314		Tallahassee, FL 3230	03

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Proprius, LLC				
(Миз	st contain the words "Limited	Liability Compa	лу, "L.L.C.," or "LLC.")	
RTICLE II - Address: ne mailing address and st	treet address of the principal o	office of the Limi	ted Liability Company is:	
<u>Pt</u>	rincipal Office Address:		Mailing Address:	
10851 Tiberio	Drive, Fort Myers, FL 33913	<u>1</u>	0851 Tiberio Drive, Fort Myers,	FL 33913
	ed Agent, Registered Office,			ualor
he Limited Liability Cor other business entity wi		Registered Age nn.)	gent's Signature: nt. You must designate an individ	
he Limited Liability Cor other business entity wi	mpany cannot serve as its own th an active Florida registration	Registered Age nn.)		
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he Limited Liability Cor other business entity wi	inpany cannot serve as its own than active Florida registration street address of the registered Sarah A. Waring	Registered Age on.) I agent are: Name	nt. You must designate an individ	
he Limited Liability Cor other business entity wi	mpany cannot serve as its own th an active Florida registration street address of the registered Sarah A. Waring	Registered Age on.) I agent are: Name	nt. You must designate an individ	

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..

Registered Agant's Signature (REQUIRED)

(CONTINUED)

<u>Title:</u> "AMBR" = Authorized Member	Name and Address:
"MGR" = Manager	
MGR	Sarah A. Waring
More	10851 Tiberio Drive
	Fort Myers. Florida 33913
	
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EV: Effective date, if other than the dat ctive date is listed, the date must be s f filing.) the date inserted in this block does not	te of filing: (OPTIONAL) pecific and cannot be more than five business days prior to or 90 meet the applicable statutory filing requirements, this date will not
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ARTICLE IV-