

**L02 000012597**

Florida Department of State  
Division of Corporations  
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DIVISION OF CORPORATION

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**LIMITED LIABILITY COMPANY**

10 TIMES 4 REALTY, LLC

*L02-12597*  
*JR*

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

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

**10 TIMES 4 REALTY, LLC**

**ARTICLE II - Address:**

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

145 Woodbridge Road  
Palm Beach, Florida 33480

**ARTICLE III - Duration:**

The period of duration for the Limited Liability Company shall be:

Perpetual

**ARTICLE IV - Management:**

(Check the appropriate box and complete the statement)

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/are:

**STOVER INDUSTRIES OF WEST PALM, INC.  
230 PARK AVENUE, SUITE 404  
NEW YORK, NEW YORK 10169**

**ARTICLE V - Admission of Additional Members:**

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

Additional Members may only be admitted on unanimous consent of the Members.

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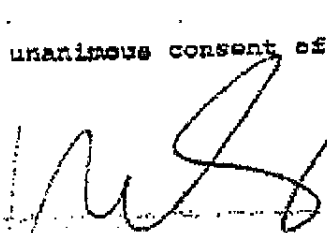
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**ARTICLE VI - Members Rights to Continue Business:**

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:

Right to continue on unanimous consent of remaining Members.



\_\_\_\_\_  
Signature of authorized representative of a member.

(In accordance with Section 609.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ROBERT SHAPIRO

\_\_\_\_\_  
Typed or printed name of signee

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

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

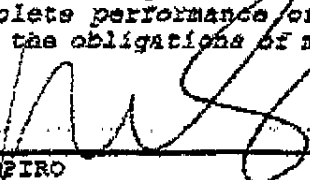
1. The name of the limited liability company is: 10 TIMES 4 REALTY, LLC

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

145 Woodbridge Road  
Florida street address (P.O. Box ~~Not~~ Acceptable)

Palm Beach, Florida 33480  
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.



ROBERT SHAPIRO  
(Authorized Signatory)

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TALLAHASSEE, FLORIDA

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