

Division of Corporations

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**L03000020067**

Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 205 - 0383

From: Account Name : EVAN MARBIN & ASSO CIATES, P.A.  
Account Number : I20000000289  
Phone : (305) 371 - 2248  
Fax Number : (305) 372 - 0681

SECRETARY OF STATE  
MAIL ROOM  
TALLAHASSEE, FLORIDA

03 JUN -4 PM 12: 00

APPROVED  
AND  
FILED

DIVISION OF CORPORATION

03 JUN -4 AM 11: 03

RECEIVED

**LIMITED LIABILITY COMPANY**

Quarter Turn Investments, L.L.C.

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

*Handwritten initials and date: 6-4-03*

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

**ARTICLE I - Name:**

The name of the Limited Liability Company is : **QUARTER TURN INVESTMENTS, L.L.C.**

**ARTICLE II - Address:**

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

**48 East Flagler Street, PH-104, Miami, Florida 33131**

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**

The name and the Florida street Address of the registered agent are:

**Daniel Moskovitz, Esq.**  
 Name

**48 East Flagler Street, PH-104**  
 Florida street address (P.O. Box **NOT** acceptable)

**Miami, Florida 33131**  
 City, State and Zip

*Having been named as registered agent and to accept service of process for the 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 608, F.S.*

*Daniel Moskovitz*  
 Registered Agent's Signature

**ARTICLE IV - Management (Check box if applicable.)**

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

*Daniel Moskovitz*  
 Signature of a member or an authorized representative of a member.

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

**Daniel Moskovitz, Esq.**  
 Typed or printed name of signee

**Filing Fees:**  
 \$100.00 Filing Fee for Articles of Organization  
 \$ 25.00 Designation of Registered Agent  
 \$ 30.00 Certified Copy (Optional)  
 \$ 5.00 Certificated of Status (Optional)

STATEMENT OF SERVICE  
 IN  
 MIAMI, FLORIDA

03 JUN - 4 PM 12: 00

APPROVE  
 AND  
 FILED