

L 04000023696

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

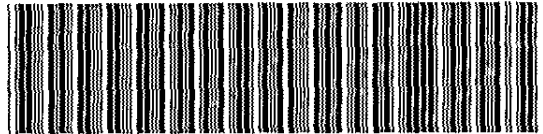
(Business Entity Name)

(Document Number)

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*BR*



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 528652 4323958

AUTHORIZATION : *Patricia Piguto*

COST LIMIT : \$ 125.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : March 29, 2004

ORDER TIME : 12:41 PM

ORDER NO. : 528652-010

CUSTOMER NO: 4323958

CUSTOMER: Mr. Bruce Vanyek  
Chuhak & Tecson, P.c.

Suite 2600  
30 S. Wacker Drive  
Chicago, IL 60606

DOMESTIC FILING

NAME: 1305 FLORIDA, LLC

EFFECTIVE DATE:

- ARTICLES OF INCORPORATION
- CERTIFICATE OF LIMITED PARTNERSHIP
- ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward - EXT. 2935

EXAMINER'S INITIALS: \_\_\_\_\_

ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name:  
The name of the Limited Liability Company is:

1305 Florida, LLC

ARTICLE II - Address:  
The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

2837 Sheridan Place

2837 Sheridan Place

Evanston, IL 60201

Evanston, IL 60201

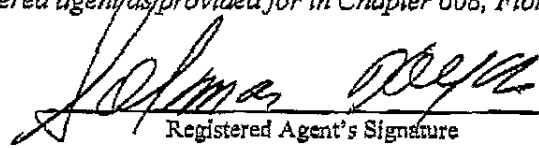
ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:  
The name and the Florida street address of the registered agent are:

Salomon J. Dayan  
Name

980 S. Ocean Blvd.  
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/as provided for in Chapter 608, Florida Statutes..*

  
Registered Agent's Signature

**ARTICLE IV- Manager(s) or Managing Member(s):**  
The name and address of each Manager or Managing Member is as follows:

Title:  
"MGR" = Manager  
"MGRM" = Managing Member

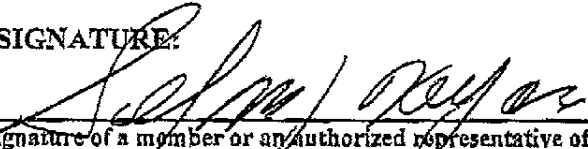
Name and Address:

MGR	Salomon J. Dayan
	2837 Sheridan Place
	Evanston, IL 60201
MGR	Adam Dayan
	2837 Sheridan Place
	Evanston, IL 60201

(Use attachment if necessary)

**NOTE:** An additional article must be added if an effective date is requested.

**REQUIRED SIGNATURE:**

  
 \_\_\_\_\_  
 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.)

Salomon J. Dayan

\_\_\_\_\_  
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 Certificate of Status (Optional)