

L04000052555

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

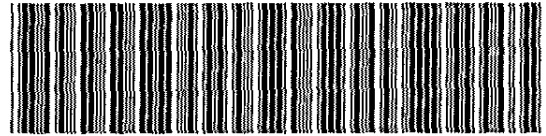
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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OFFICE OF STATE  
CORPORATIONS  
TALLAHASSEE, FLORIDA

BK



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 805661 7136638

AUTHORIZATION : *Patricia Piquero*

COST LIMIT : \$ 160.00

04 JUL 15 PM 5:08  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : July 15, 2004

ORDER TIME : 12:17 PM

ORDER NO. : 805661-005

CUSTOMER NO: 7136638

CUSTOMER: Mark C. Katzeff, Esq  
Mark C. Katzeff, P.a.

Suite 300  
18305 Biscayne Boulevard  
Aventura, FL 33160

DOMESTIC FILING

NAME: DANIA SHOPPING PLAZA, 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**

**FILED**  
04 JUL 15 PM 5:08  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

Dania Shopping Plaza, LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

18151 N.E. 31st Ct.

Ste. 1117

Aventura, FL 33160

**Mailing Address:**

18151 N.E. 31st Ct.

Ste. 1117

Aventura, FL 33160

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

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

Shlomo Benoit

Name

18151 N.E. 31st Ct., Ste. 1117

Florida street address (P.O. Box **NOT** acceptable)

Aventura

FLORIDA 33160

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:**

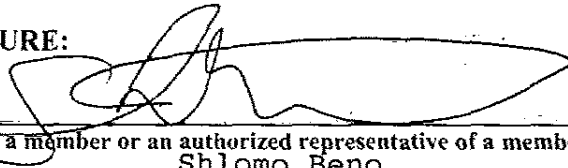
MGRM  
Shlomo Beno  
18151 N.E. 31st Ct., Ste. 1117  
Aventura, FL 33160

MGRM  
Meir Yaloz  
6311 S.W. 130th Ave.  
Davie, FL 33330

(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.  
Shlomo Beno

(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.)

SHLOMO BENO

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)