

L 04000059927

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP    WAIT    MAIL

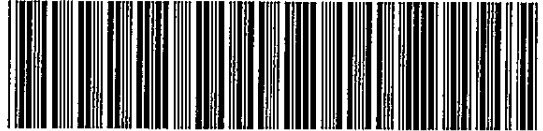
(Business Entity Name)

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04 AUG 10 PM 5:29  
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04 AUG 10 AM 10:59  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

*BK*



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 841127 7262688

AUTHORIZATION : *Patricia Pijoto*

COST LIMIT : \$ 125.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : August 9, 2004

ORDER TIME : 9:43 AM

ORDER NO. : 841127-005

CUSTOMER NO: 7262688

CUSTOMER: Joshua D. Brinen, Esq.  
Joshua D. Brinen, Esq

Suite 1200  
11 Park Place  
New York, NY 10007

DOMESTIC FILING

NAME: 1530 42ND CIRCLE, 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: \_\_\_\_\_



FLORIDA DEPARTMENT OF STATE  
Glenda E. Hood  
Secretary of State

August 10, 2004

DARLENE WARD  
CSC  
TALLAHASSEE, FL

SUBJECT: 1530 42ND CIRCLE, LLC  
Ref. Number: W04000030423

**RESUBMIT**

Please give original  
submission date as file date.

04 AUG 10 PM 5:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA  
**FILED**

We have received your document for 1530 42ND CIRCLE, LLC and check(s) totaling \$125.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The company cannot be its own Registered Agent.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6914.

Buck Kohr  
Document Specialist

Letter Number: 804A00049555

04 AUG 11 AM 10:56  
DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA  
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ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

FILED  
04 AUG 10 PM 5:30  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

1530 42nd Circle, LLC

ARTICLE II - Address:

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

Principal Office Address:

1530 42nd Circle, LLC

7 Bluebird Lane

Huntington, NY 11743

Mailing Address:

1530 42nd Circle, LLC

7 Bluebird Lane

Huntington, NY 11743

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

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

Joshua Brinen c/o Ruth Brinen

Name

43-28 Fountains Drive

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

Lake Worth

FLORIDA 33467

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..*

Joshua D. Brinen

By: 

Registered Agent's Signature

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TALLAHASSEE, FLORIDA

**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  
\_\_\_\_\_  
  
\_\_\_\_\_  
  
\_\_\_\_\_  
  
\_\_\_\_\_

Benjamin J. Hurowitz  
7 Bluebird Lane  
Huntington, NY 11743  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

(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.)

By: Benjamin J. Hurowitz  
\_\_\_\_\_  
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)