

L05000028928

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

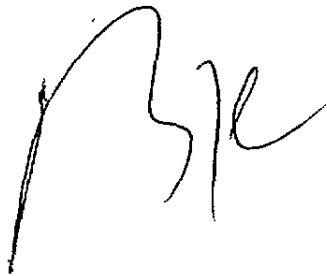
PICK-UP     WAIT     MAIL

(Business Entity Name)

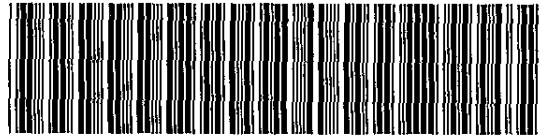
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TALLAHASSEE, FLORIDA

05 MAR 23 PM 4:32

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CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032  
REFERENCE : 273986 10463A  
AUTHORIZATION : Patricia Pajito  
COST LIMIT : \$ 155.00

EFFECTIVE DATE  
3/22/05  
05 MAR 23 PM 4:32  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ORDER DATE : March 23, 2005  
ORDER TIME : 2:02 PM  
ORDER NO. : 273986-010  
CUSTOMER NO: 10463A  
CUSTOMER: Ms. Larissa K. Lincoln  
Cohen Norris Scherer  
Weinberger & Wolmer  
Suite 400  
712 U.s. Highway 1  
North Palm Bch, FL 33408-7146

DOMESTIC FILING

NAME: STUART KANNER 2, LLC

EFFECTIVE DATE: MARCH 22, 2005

       ARTICLES OF INCORPORATION  
       CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX CERTIFIED COPY  
       PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - EXT. 2955  
EXAMINER'S INITIALS: \_\_\_\_\_

**ARTICLES OF ORGANIZATION OF  
STUART KANNER 2, LLC**

**EFFECTIVE DATE**  
3/22/05  
**FILED**  
05 MAR 23 PM 4:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The undersigned hereby forms and establishes a limited liability company pursuant to Chapter 608, Florida Statutes as follows:

**ARTICLE I**

The name of this limited liability company is **STUART KANNER 2, LLC**.

**ARTICLE II**

This limited liability company shall become effective **MARCH 22, 2005**, unless sooner terminated as provided in the Operating Agreement executed or to be executed by the members..

**ARTICLE III**

The mailing address and street address of the principal place of business of this limited liability company is 1560 Latham Road, No. 7, West Palm Beach, FL 33409. This limited liability company may, at its discretion, change the address of its principal place of business.

**ARTICLE IV**

The name and street address of the initial registered agent of this limited liability company is **ANDREW M. JACOBSON**, 712 U.S. Highway One, Suite 400, North Palm Beach, Florida 33408.

**ARTICLE V**

The management of this limited liability company shall be vested in a member or members (i.e. management committee as described in the Operating Agreement) and is, therefore, a member-managed company. The managing member is Steven E. McCraney, 1560 Latham Road, No. 7, West Palm Beach, FL 33409.

**ARTICLE VI**

Additional members may be admitted to this limited liability company upon such terms and conditions as shall be established by the members as described in the Operating Agreement.

**IN TESTIMONY WHEREOF**, I have hereunto subscribed my name this 23<sup>rd</sup> day of March, 2005.

  
\_\_\_\_\_  
**ANDREW M. JACOBSON,**  
Authorized Representative of a Member

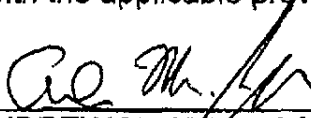
**CERTIFICATE DESIGNATING REGISTERED OFFICE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

That **STUART KANNER 2, LLC**, a Florida Limited liability company, with its registered office at 1560 Latham Road, No. 7, West Palm Beach, FL 33409, has named **ANDREW M. JACOBSON**, at 712 U.S. Highway One, Ste 400, North Palm Beach, FL 33408 as its initial registered agent to accept service of process within this State.

**ACKNOWLEDGMENT:**

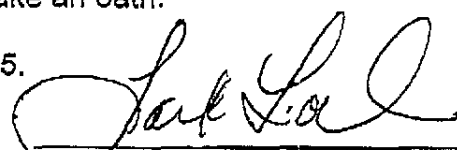
Having been named registered agent to accept service of process for the above-stated limited liability company at the place designated in this Certificate, I hereby accept to act in such capacity and agree to comply with the applicable provisions of law.

By:   
**ANDREW M. JACOBSON,**  
Registered Agent

STATE OF FLORIDA )  
COUNTY OF PALM BEACH )

The foregoing instrument was acknowledged before me this 23<sup>rd</sup> day of March, 2005, by **ANDREW M. JACOBSON**, who is personally known to me or who has produced Florida State Driver's License Number NA as identification and who did ( ) or did not (X) take an oath.

Executed this 23<sup>rd</sup> day of March, 2005.

  
Signature of Notary  
Printed Name: LARISSA-K. LINCOLN  
My Commission Expires:  
My Commission Number:

LLCariclessStuartKanner2AMJ.doc

