Florida Department of State Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.

Account Number : 075350000353 Phone : (212)431-5000 Fax Number : (212)431-1441

LIMITED LIABILITY COMPANY

Family Realty, LLC

Certificate of Status	0
Certified Copy	0
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Corporate Filing

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BLUMBERGEXCELSIOR

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May 24 2005 11:41

RTICLE I - Name:	
he name of the Limited Liability Company is	3: , <u>, , , , , , , , , , , , , , , , , ,</u>
iamily Resity, LLC	
Transfir to Tr. A.J.J.	
RTICLE II - Address: he mailing address and street address of the r	principal office of the Limited Liability Comp
THE STATE MACHINE WITH SECOND STREET	
·	
rincipal Office Address:	Mailing Address:
	·
124 COURTNEY CHASE CIRCLE, APT 511	Mailing Address:
124 COURTNEY CHASE CIRCLE, APT 511	Mailing Address: 1124 COURTNEY CHASE CIRCLE, APT 511
124 COURTNEY CHASE CIRCLE, APT 511 DRLANDO, FL 32837	Mailing Address: 1124 COURTNEY CHASE CIRCLE, APT 511 ORLANDO, FL 32837
124 COURTNEY CHASE CIRCLE, APT 511 ORLANDO, FL 32837 ARTICLE III - Registered Agent, Registere	Mailing Address: 1124 COURTNEY CHASE CIRCLE, APT 511 ORLANDO, FL 32837 od Office, & Registered Agent's Signature:
1124 COURTNEY CHASE CIRCLE, APT 511 ORLANDO, FL 32837 ARTICLE III - Registered Agent, Register	Mailing Address: 1124 COURTNEY CHASE CIRCLE, APT 511 ORLANDO, FL 32837 od Office, & Registered Agent's Signature:
Principal Office Address: 1124 COURTNEY CHASE CIRCLE, APT 511 ORLANDO, FL 32837 ARTICLE III - Registered Agent, Registered The name and the Florida street address of the MARIA INES CHICA	Mailing Address: 1124 COURTNEY CHASE CIRCLE, APT 511 ORLANDO, FL 32837 od Office, & Registered Agent's Signature:

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 agant as provided for in Chapter 608, F.S..

Plorida street address (P.O. Box NOT acceptable)

32837

gistered Agent's Signature

City, State, and Zip

1124 COURTNEY CHASE CIRCLE, APT 511

(CONTINUED)

Page 1 of 2

BlumbergExcelsior Corporate Services, Inc. c/o Candice Pignatare 62 White Street New York, NY 10013.

ORLANDO

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<u> Citle:</u>	Name and Address:
MGR" = Manager	· · · · · · · · · · · · · · · · · · ·
MGRM" = Managing Member	•
/GRM	JOHN M. CHIĆA
rioi tiri	1124 COURTNEY CHASE CIRCLE, APT 511
	ORLANDO, FL 32837
	,,,,,
Use attachment if necessary) NOTE: An additional article mu	st be added if an effective date is requested.
REQUIRED SIGNATURE:	
REQUIRED SIGNATURE:	
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0	ober or an authorized representative of a member
Signature of a men (In accordance with of this document co	aber or an authorized representative of a member assection 608.408(3), Florida Statutes, the execution institutes an affirmation under the penaltics of perjury and herein are true.)
Signature of a men (In accordance with of this document co	new an authorized representative of a member as a section 608.408(3), Florida Statutes, the execution anaffirmation under the penaltics of perjury AHA and herein are true.)
Signature of a men (In accordance with of this document co- that the facts state	section 608.408(3), Florida Statutes, the execution institutes an affirmation under the penaltics of perjury and herein are true.)
Signature of a men (In accordance with of this document co- that the facts state	nber or an authorized representative of a member assection 608,408(3), Florida Statutes, the execution ensitintes an affirmation under the penaltics of perjury Address are true.)
(In accordance with of this document contact the facts state JOHN M. CHICA Filing Fees: \$125.00 Filing Fee for Articles of One of the facts of	Typed or printed name of signee
Signature of a men (In accordance with of this document co that the facts state JOHN M. CHICA Piling Fees:	aber or an authorized representative of a member assection 608,408(3), Florida Statutes, the execution institutes an affirmation under the penaltics of perjury AH 224 and herein are true.) Typed or printed name of signed arganization and Designation

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