

L07000026377

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

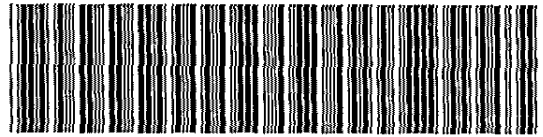
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TALLAHASSEE, FLORIDA

FILED
07 MAR -9 PH 3:43
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

6077

00077077



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 795557 4808307

AUTHORIZATION : *[Signature]*

COST LIMIT : \$ 125.00

07 MAR - 9 PM 3:43
SECRETARY OF STATE
TALLAHASSEE FLORIDA
FILED

ORDER DATE : March 9, 2007

ORDER TIME : 1:12 PM

ORDER NO. : 795557-005

CUSTOMER NO: 4808307

DOMESTIC FILING

NAME: GULF SHORE, LLC

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Amanda Haddan - EXT. 2955

EXAMINER'S INITIALS: _____

07 MAR 19 PM 3:43
FILED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Gulf Shore, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC," or "L.C.,")

ARTICLE II - Address:

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

Principal Office Address:

27 Chesterwoods Drive

Chester, NJ 07930

Mailing Address:

27 Chesterwoods Drive

Chester, NJ 07930

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Theodore Wielkopolski

Name

4401 Gulf Shore Boulevard North, Apartment 1504

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

Naples, FL 34103

FL

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, F.S.



Registered Agent's Signature (REQUIRED)
Theodore Wielkopolski

(CONTINUED)

Page 1 of 2

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:

Manager

Theodore Wielkopolski

27 Chesterwoods Drive

Chester, NJ 07930

Manager

Kathleen Wielkopolski

27 Chesterwoods Drive

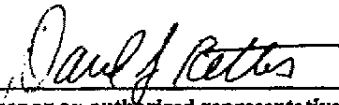
Chester, NJ 07930

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

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: David J. Ritter, Esq.

Typed or printed name of signee

Filing Fees: _____

**\$125.00 Filing Fee for Articles of Organization and Designation
of Registered Agent**

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)