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MAR 17 2009

EXAMINER





TOR SENVICE COMPANY.
ACCOUNT NO. : 072100000032
REFERENCE : 926552 4301683
AUTHORIZATION:
COST LIMIT : \$ 155.00
COST LIMIT: \$ 155.00 ORDER DATE: March 17, 2009 ORDER TIME: 9:05 AM ORDER NO.: 926552-005
ORDER TIME : 9:05 AM
ORDER NO. : 926552-005
CUSTOMER NO: 4301683
<u>\</u>
DOMESTIC FILING
NAME: DOROTHY FLORIDA LLC
EFFECTIVE DATE:
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: Susie Knight - EXT. 2956
EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION OF DOROTHY FLORIDA LLC

The undersigned manager signs these Articles of Organization and forms a limited liability company (the "Company") under the Florida Limited Liability Company Act (the "Act"), as follows:

ARTICLE I. NAME

The name of the Company is: Dorothy Florida LLC.

ARTICLE II. MAILING ADDRESS AND STREET ADDRESS

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

Principal Office Address:

200 Madison Avenue

5th Floor

New York, New York 10016

Attn: John Gacinski

Mailing Address:

200 Madison Avenue

5th Floor

New York, New York 10016

Attn: John Gacinski

ARTICLE III. INITIAL REGISTERED AGENT. REGISTERED OFFICE, AND REGISTERED AGENT'S SIGNATURE

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

Corporation Service Company 1201 Hays Street Tallahassee, Florida 32301.

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.

CORPORATION SERVICE COMPANY

Registered Agent's Signature

William M. Edrington

Authorized Representative

ARTICLE IV. MANAGERS

The name and address of each manager is as follows:

Title: Name and Address: Manager **Emily Rose** 200 Madison Avenue 5th Floor New York, New York 10016 Manager John Gacinski 200 Madison Avenue 5th Floor New York, New York 10016 Manager James Marrow 200 Madison Avenue 5th Floor New York, New York 10016

ARTICLE V. EXISTENCE

The Company's existence will commence on the date and time when these Articles of Organization are filed, in accordance with Section 608.409(1) of the Act.

Signature of a Manager

John Gacinski

(Typed or printed name of signee)