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**LID 000032319**

Florida Department of State  
Division of Corporations  
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**FLORIDA LIMITED LIABILITY CO.  
RK 16299 BISCAYNE LLC**

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

**T. CLINE**

MAR 25 2010

**EXAMINER**

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

RK 16299 Biscayne 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:17100 Collins Avenue  
Suite 225  
Sunny Isles Beach FL 33160Mailing Address:17100 Collins Avenue  
Suite 225  
Sunny Isles Beach FL 33160

## ARTICLE III - Registered Agent, Registered Office, &amp; 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:

Mitchell Cutler  
Name  
17100 Collins Avenue, Suite 225  
Florida street address (P.O. Box **NOT** acceptable)  
Sunny Isles Beach FL 33160  
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.

Mitchell Cutler

Registered Agent's Signature (REQUIRED)

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**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:**MGRMRaanan Katz16400 Collins Avenue, # PH46  
Sunny Isles Beach, FL 33160MGRPhyllis Katz16400 Collins Avenue #PH46  
Sunny Isles Beach, FL 33160MGRDaniel Katz248 Park Drive  
Bal Harbour, FL 33154

(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  
business days prior to or 90 days after the date of filing.)2010 MAR 24 AM 8:19  
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ALLAHASSEE, FLORIDA

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**REQUIRED SIGNATURE:**Raanan Katz

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.)Raanan Katz

Typed or printed name of signer

**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)

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