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Division of Corporations Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

: CORPORATION SERVICE COMPANY Account Name

Account Number : 120000000195 : (850)521-1000 : (850)558-1515 Fax Number

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:_

10

FLORIDA LIMITED LIABILITY CO. **22B LLC**

| Certificate of Status | 0 |
|-----------------------|----------|
| Certified Copy | 0 |
| Page Count | 03 |
| Estimated Charge | \$125.00 |

Electronic Filing Menu

Help

APR & 2 2010



| ARTICLES OF ORGANIZATION FOR ARTICLE I - Name: The name of the Limited Liability Comp | | |
|---|--|--|
| 22B LLC | | |
| (Must end with the words "Limi | ited Liability Company, "L.L.C.," or "LLC.") | |
| ARTICLE II - Address: The mailing address and street address of | of the principal office of the Limited I | Liability Company is: |
| Principal Office Address: | Mailing Address: | |
| 1980 South Ocean Drive | Sharon Deutscher Grin | dle |
| Unit 22B | 8 Kerric Court | |
| Hallandale, FL 33009 | Southampton, NY 1196 | 58 |
| business entity with an active Florida registration.) The name and the Florida street address <u>Corporation Servi</u> | | |
| 1201 Hays Street | | |
| | treet address (P.O. Box NOT acceptable) | |
| | , | |
| City | FL 32301 State, and Zip | |
| Having been named as registered agent of liability company at the place designate registered agent and agree to act in this constantes relating to the proper and compacted the obligations of my position of Corporation Serv BY: Registered Agent's | ted in this certificate, I hereby accept is capacity. I finither agree to comply with older performance of my duties, and I as registered agent as provided for in the Company | the appointment as th the provisions of all un familiar with and Chapter 608, F.S Carina L. Duniap Asst. Vice President |
| (CO | NTINUED) ige 1 of 2 | VISION OF DERPORAT |

| Title: "MGR" = Manager "MGRM" = Managing Member | Name and Address; |
|---|--|
| MGRM | Sharon Deutscher Grindle |
| | 8 Kerrie Court |
| · | Southampton, NY 11968 |
| MGRM | Samuel Deutscher |
| | 222 Andover Place |
| | Robbinsville, NJ 08691 |
| | |
| | |
| | A A No. of the Control of the Contro |
| | |
| | |
| | |
| (Use attachment if necessary) | |

REQUIRED SIGNATURE:

to or 90 days after the date of filing.)

Signature of a member or an authorized representative of a member.

(If an effective date is listed, the date must be specific and cannot be more than five business days prior

(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.)

Sharon Deutscher Grindle

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

ARTICLE IV- Manager(s) or Managing Member(s):

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