

L10000106322

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

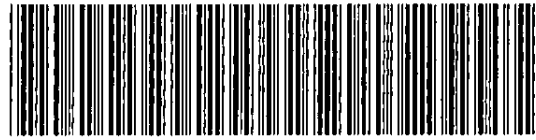
(Business Entity Name)

(Document Number)

Certified Copies _____, Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



500184817755

10/13/10--01006--011 **1000.00

B. KOHR
OCT 13 2010
EXAMINER

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 OCT 11 PM 4:55

Advanced Incorporating Service, Inc.

1317 California Street
P.O. Box 20396
Tallahassee, FL 32316

Phone: 850-222-CORP
Fax: 850-575-2724
Email: orders@advancedincorporating.com
Website: www.advancedincorporating.com

NAME OF ENTITY	FOR OFFICE USE ONLY

FLORIDA STATE
DIVISION OF CORPORATIONS
10 OCT 11 PM 4:55

PICK ONE:

CERTIFIED COPY PHOTOCOPY

FILING:

CORPORATION LLC LIMITED PARTNERSHIP GENERAL PARTNERSHIP
 FICTITIOUS NAME SERVICEMARK/TRADEMARK AMENDMENT
 FOREIGN QUALIFICATION JUDGMENT LIEN
 OTHER

RETRIEVAL:

GOOD STANDING CERT/C.U.S. CERTIFIED COPY PHOTOCOPY

Of: _____

APOSTILLE/CERTIFICATION REQUEST:

Country _____

Amount of Documents _____

DATE _____ TIME _____

Notes: _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 OCT 11 PM 4:55

ARTICLE I - Name:

The name of the Limited Liability Company is:

1719 Whitehall 205, LLC, a Florida Limited Liability Company

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

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

4000 Hollywood Boulevard, Suite 375-S
Hollywood, Florida 33021

4000 Hollywood Boulevard, Suite 375-S
Hollywood, Florida 33021

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:

Jerald C. Cantor

Name

4000 Hollywood Blvd., Suite 375-S

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

Hollywood

FL 33021

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)

(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:

MGR

Avram Tezartas

8051 N. Ocean Drive #1805

Hollywood, Florida 33018

(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.)

Jerald C. Cantor

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)