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Florida Department of State  
Division of Corporations  
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RECEIVED  
12 FEB - 6 PM 12:00  
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TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.  
RK SANS SOUCI PLAZA, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

PH/FP  
12 FEB - 6 PM 9:59  
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B. BOSTICK  
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EXAMINER

12/18/2029 01:38  
02/07/2012 17:33  
12/15/2029 05:15

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RK\_ASSOCIATES

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

RK Sans Souci Plaza, LLC

(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:

17100 Collins Avenue, Ste 225  
Sunny Isles Beach, FL 33160

17100 Collins Avenue, Ste 225  
Sunny Isles Beach, FL 33160

**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:

Mitchell Cutler

Name

17100 Collins Avenue, Ste 225

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

Sunny Isles Beach FL 33160

City, State, and Zip

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FALL HARBOR, FLORIDA

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*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:

<u>Title</u>	<u>Name and Address</u>
"MGR" = Manager "MGRM" = Managing Member	
<u>MGRM</u>	<u>Raanan Katz</u> <u>17100 Collins Avenue, Ste 225</u> <u>Sunny Isles Beach, FL 33160</u>
<u>MGR</u>	<u>Daniel Katz</u> <u>17100 Collins Avenue, Ste 225</u> <u>Sunny Isles Beach, FL 33160</u>
_____	_____
_____	_____
_____	_____

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(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:**

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. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.)

Raanan Katz  
Typed or printed name of signer

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