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8/16/12

Division of Corporations

Florida Department of State  
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Electronic Filing Cover Sheet

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## To:

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Fax Number : (850) 617-6383

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Account Name : HUBCO  
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Phone : (516) 935-3910  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FLORIDA LIMITED LIABILITY CO.  
1501 Sunny Isle LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

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ARTICLES OF ORGANIZATION  
FOR  
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **1501 Sunny Isle LLC**

ARTICLE II - Address

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

Principal Office Address:

17001 Collins Avenue, Unit 1501

Sunny Isles Beach, FL 33160

Mailing Address:

1700 Collins Avenue, Unit 1501

Sunny Isles Beach, FL 33160

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature

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

Hubco Registered Agent Services, Inc.

Name

155 Office Plaza Drive, 1st Floor

(P.O. Box or Mail Drop Box **NOT** Acceptable)

Tallahassee, FL 32301

(City / State / 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.*

Bruce B. Hubbard

Registered Agent's Signature - Bruce B. Hubbard, President

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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:**

MGR

Juan Ortiz - 1512 Palisade Avenue, Apt. 18J, Fort Lee, NJ 07024

(Use attachment if necessary)

**REQUIRED SIGNATURE:**



\_\_\_\_\_  
Signature of a member or 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. )

Juan Ortiz

\_\_\_\_\_  
Typed or printed name of signer

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