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T SCHROEDER

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 881176 4305390

AUTHORIZATION :

*Spurlockman*

COST LIMIT : \$ 125.00

ORDER DATE : November 20, 2015

ORDER TIME : 12:47 PM

ORDER NO. : 881176-005

CUSTOMER NO: 4305390

DOMESTIC FILING

NAME: SOBEL FAMILY 2015, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION  
CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY  
XX PLAIN STAMPED COPY  
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Melissa Zender - EXT. 62956

EXAMINER'S INITIALS: \_\_\_\_\_

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SOBEL FAMILY 2015, 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:

3 Grove Isle Drive, Apt. 1210  
Coconut Grove, FL 33133

Mailing Address:

3 Grove Isle Drive, Apt. 1210  
Coconut Grove, FL 33133

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:

Corporation Service Company  
Name

1201 Hays Street

Florida street address (P.O. 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 605, F.S.*

Corporation Service Company

By:

Registered Agent's Signature (REQUIRED)

Doreen S. Haeselin, Asst. V.P.

(CONTINUED)

**ARTICLE IV-**

The name and address of each person authorized to manage and control the Limited Liability Company:

**Title:**

"AMBR" = Authorized Member

"MGR" = Manager

AMBR

**Name and Address:**

Jonathan Sobel

44 Spring Hollow Road

Far Hills, NJ 07931

AMBR

Julie Sobel Kaplan

31 Mountain Ridge Drive

Livingston, NJ 07039

AMBR

Scott Sobel

53 North Moore Street, Apt. 7D

New York, NY 10013

AMBR

Clifford M. Sobel

3 Grove Isle Drive, Apt. 1210

Coconut Grove, FL 33133

(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.)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

**ARTICLE VI:** Other provisions, if any.

**REQUIRED SIGNATURE:**



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

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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.

Kim McEllen, Authorized Representative

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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FLORIDA

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**SOBEL FAMILY 2015, LLC**

**Additional Members**

**Title:**

**Name and Address:**

AMBR

Barbara Sobel  
3 Grove Isle Drive, Apt. 1210  
Coconut Grove, FL 33133

MGR

Clifford M. Sobel  
3 Grove Isle Drive, Apt. 1210  
Coconut Grove, FL 33133

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