Division of Corporations



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.

(((H22000122067 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850) 617-6381

From:

Account Name : VCORP SERVICES, LLC

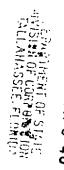
Account Number : I20080000067 Phone : (845)425-0077 Fax Number : (845)618-3589

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

Email Address:

FLORIDA LIMITED LIABILITY CO. 1614 Harrison Street LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	S125.00



ARIKIF	SOFORGANIZATION FOR		
ARTICLE I - Name:			
The name of the Limited Lia	ability Company is:		\$1 ₄₁
			•
1614 Harrison St			
(Must	end with the words "Limited	Liability Compan	y, "L.L.C.," or "LŁC.")
ARTICLE II - Address:			
The mailing address and stre	eet address of the principal o	ffice of the Limited	d Liability Company is:
-	·		• •
<u>Prii</u>	ncipal Office Address:		Mailing Address:
2124411 1 1 1	lianie	210	6 Flatbush Avenue
2126 Flatbush A	YCHRIC	212	O PIRROUSH AVEHUC
Brooklyn, NY 1 ARTICLE III - Registered	1234 Agent, Registered Office,	& Registered Age	oklyn, NY 11234 ent's Signature:
Brooklyn, NY I ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, pany cannot serve as its own an active Florida registration	& Registered Agent.	oklyn, NY 11234
Brooklyn, NY I ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, pany cannot serve as its own an active Florida registration	& Registered Agent. on.) i agent are:	oklyn, NY 11234 ent's Signature:
Brooklyn, NY 1 ARTICLE III - Registered	Agent, Registered Office, pany cannot serve as its own an active Florida registration reet address of the registered	& Registered Agent. on.) i agent are:	oklyn, NY 11234 ent's Signature:
ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, pany cannot serve as its own an active Florida registration reet address of the registered	& Registered Agent. on.) diagent arc:	oklyn, NY 11234 ent's Signature:
ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, pany cannot serve as its own an active Florida registration reet address of the registered Veorp Services, LLC	& Registered Agent. nn.) d agent are: Name	ent's Signature: You must designate an individual or
ARTICLE III - Registered (The Limited Liability Companother business entity with	Agent, Registered Office, pany cannot serve as its own an active Florida registratic reet address of the registered Veorp Services, LLC	& Registered Agent. nn.) d agent are: Name	ent's Signature: You must designate an individual or

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..

> Mimi Sanik Registered Agent's Signature (REQUINED)

> > (CONTINUED)

Rueld2

Title: "AMBR" = Authorized Member	Name and Address:	
AMBR = Authorized Member "MGR" = Manager		
AMBR	Konstantin Geyman	
	2126 Flatbush Avenue	
	Brooklyn, NY 11234	
	<u> </u>	
		
		
(Use attachment if necessary)		
ctive date is listed, the date must be specific f filing.) the date inserted in this block does not meet t	ting: (OPTIONAl c and cannot be more than five business days prior the applicable statutory filing requirements, this date ate's records.	to or 90 da
ctive date is listed, the date must be specific filing.) the date inserted in this block does not meet then it's effective date on the Department of States.	c and cannot be more than five business days prior the applicable statutory filing requirements, this date	to or 90 da
ctive date is listed, the date must be specific filing.) the date inserted in this block does not meet then it's effective date on the Department of States.	c and cannot be more than five business days prior the applicable statutory filing requirements, this date	to or 90 da
ctive date is listed, the date must be specific f filing.) the date inserted in this block does not meet the date inserted are on the Department of St EVI: Other provisions, if any. REQUIRED SIGNATURE:	the applicable statutory filing requirements, this date ate's records.	to or 90 da
ctive date is listed, the date must be specific f filing.) the date inserted in this block does not meet the date inserted are on the Department of St EVI: Other provisions, if any. REQUIRED SIGNATURE:	the applicable statutory filing requirements, this date ate's records.	to or 90 da
ctive date is listed, the date must be specific filing.) the date inserted in this block does not meet the date inserted are on the Department of St. EVI: Other provisions, it any. REQUIRED SIGNATURE: Signature of a membe This document is executed in I am aware that any false info	c and cannot be more than five business days prior the applicable statutory filing requirements, this date	te or 90 da
service date is listed, the date must be specific filing.) the date inserted in this block does not meet the date inserted are on the Department of St. EVI: Other provisions, it any. REQUIRED SIGNATURE: Signature of a member This document is executed in I am aware that any false inforconstitutes a third degree felo	Ralesa Uramover than five business days prior the applicable statutory filing requirements, this date are s records. Ralesa Uramover or an authorized representative of a member. In accordance with section 605.0203 (1) (b), Florida Sommation submitted in a document to the Department of	te or 90 da
ctive date is listed, the date must be specific filing.) the date inserted in this block does not meet the date inserted are on the Department of St. EVI: Other provisions, if any. Signature of a member This document is executed in I am aware that any false inforconstitutes a third degree felomate.	Ralesa Uramover than five business days prior the applicable statutory filing requirements, this date are s records. Ralesa Uramover or an authorized representative of a member. In accordance with section 605.0203 (1) (b), Florida Sommation submitted in a document to the Department of	te or 90 da
servive date is listed, the date must be specific of filing.) the date inserted in this block does not meet the nent's effective date on the Department of St EVI: Other provisions, it any. Signature of a member This document is executed in I am aware that any false inforconstitutes a third degree felomate.	Races and cannot be more than five business days prior the applicable statutory filing requirements, this date ate's records. Races are broken. For or an authorized representative of a member, in accordance with section 605.0203 (1) (b), Florida S prination submitted in a document to the Department on as provided for in s.817.153, F.S.	te or 90 da
ctive date is listed, the date must be specific filing.) the date inserted in this block does not meet the date inserted are on the Department of Stevil: Other provisions, if any. EVI: Other provisions, if any. Signature of a member This document is executed in I am aware that any false inforconstitutes a third degree felomates. Raeesa Ibrahim	Ralesas Dramon rea an authorized representative of a member. n accordance with section 605.0203 (1) (b), Florida S romation submitted in a document to the Department of the section of	te or 90 da
ctive date is listed, the date must be specific filing.) the date inserted in this block does not meet the date inserted are on the Department of Stevil: Other provisions, if any. EVI: Other provisions, if any. Signature of a member This document is executed in I am aware that any false inforconstitutes a third degree felomates. Reesa Ibrahim Ty \$125.00 Filing Fee for Articles of Organization.	Races and cannot be more than five business days prior the applicable statutory filing requirements, this date ate's records. Races are broken. For or an authorized representative of a member, in accordance with section 605.0203 (1) (b), Florida S prination submitted in a document to the Department on as provided for in s.817.153, F.S.	te or 90 da
strive date is listed, the date must be specific filing.) the date inserted in this block does not meet the date inserted are on the Department of Strice (Strice date on the Department of Strice (Stric	Ralesas Dramon rea an authorized representative of a member. n accordance with section 605.0203 (1) (b), Florida S romation submitted in a document to the Department of the section of	Statutes. of State
ctive date is listed, the date must be specific filing.) the date inserted in this block does not meet the date inserted are on the Department of Stevil: Other provisions, if any. EVI: Other provisions, if any. Signature of a member This document is executed in I am aware that any false inforconstitutes a third degree felomates a state of the constitutes at the degree felomates are secured in I am aware that any false inforconstitutes a third degree felomates are secured in Ty. \$125.00 Filing Fee for Articles of Organiz \$30.00 Certified Copy (Optional)	Ralesas Dramon rea an authorized representative of a member. n accordance with section 605.0203 (1) (b), Florida S romation submitted in a document to the Department of the section of	swill not be swill not be swill not be statutes. of State