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.

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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 : RABIDEAU KLEIN
Account Number : I2020000035
Phone : (561)655-6221

Fax Number : (561)655-3221

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

Email Address: DKLEIN RABIDEAUKLEIN. Con

FLORIDA LIMITED LIABILITY CO.

, 626 HUNTER STREET, LLC

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$160.00

T. SCOTT

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COVER LETTER

	New Filing Section Division of Corporations	
SUBJECT	626 HUNTER STREET, LLC	
002220	Name of Limited Liability Company	
The enclos	osed Articles of Organization and fec(s) are submitted for filing.	
Please retu	turn all correspondence concerning this matter to the following:	
	DAVID E. KLEIN	
	Name of Person	
	RABIDEAU KLEIN	
	Firm/Company	
	440 ROYAL PALM WAY, SUITE 101	
	Address	
• •	PALM BEACH, FL 33480	
	City/State and Zip Code DKLEIN@RABIDEAUKLEIN.COM	
	E-mail address: (to be used for future annual report notification)	_
For further i	r information concerning this matter, please call:	mţdra
and depth de	GARRETT ELLIS 561 655-6221	
огура ым	Name of Person Area Code Daytime Telephone Number	ON DA LINES P
6 Enclosed	l is a check for the following amount:	67 Hu 18 K
C: cate Sus125.0 C: fed cory Pr Cot B: died hark	Certificate of Status Certified Copy Certificate of Status Certified Copy Certified	iclosed) Cot
-	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Street Address New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303'	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTIC	LE [-	Name
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The name of the Limited Liability Company is:

626 HUNTER STREET, LLC

(Must conatin 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:

6417 GEORGIA AVENUE

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Fili :

eofS:

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WEST PALM BEACH, FL 33405

6417 GEORGIA AVENUE WEST PALM BEACH, FL 33405

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:

DAVID E. KLEIN

Name

440 ROYAL PALM WAY, SUITE 101

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

PAĽM BEACH FĽ

33480

City

State

Zip

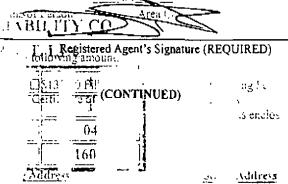
Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all 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..

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P.O. Nox 6327

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Title:	Name and Address:	
"AMBR" = Authorized Member	r	
"MGR" = Manager		
MGR	MARGARET BRAFF	
	6417 GEORGIA AVENUE WEST PALM BEACH, FL 33405	
(Use attachment if necessary)		
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