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From:

Account Name : LLOYD GRANET
Account Number : 074632001025
Phone : (561)999-9300
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### LIMITED LIABILITY COMPANY

HALCYON HILLS L.L.C.

Certificate of Status	0
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#### FAX AUDIT NO. H990000114290

# ARTICLES OF ORGANIZATION OF HALCYON HILLS L.L.C.

#### ARTICLE I NAME

The name of the Limited Liability Company is: Halcyon Hills L.L.C.

## ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: 95 Forest Avenue, Locust Valley, NY 11560.

## ARTICLE III DURATION

The period of duration for the Limited Liability Company shall be April 30, 2099 unless dissolved before such date in accordance with applicable laws or its Articles of Organization.

# ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by managers and the names and addresses of such managers who are to serve as managers are:

Bernadette Castro

95 Forest Avenue, Locust Valley, NY 11560.

### ARTICLE V ADMISSION OF ADDITIONAL MEMBERS

A Person may be admitted as a member after the date of this Agreement upon the vote or written consent of at least a majority of the Membership Interest.

# ARTICLE VI MEMBERS RIGHTS TO CONTINUE BUSINESS

The bankruptcy, death, dissolution, liquidation, termination or adjudication of incompetency of a Member shall not cause the termination or dissolution of the Company and the business of the Company shall continue. Upon any such occurrence, the trustee, receiver, executor, administrator, committee, guardian, or conservator of such Member shall have all the rights of such Member for the purpose of settling or managing its estate or property, subject to satisfying conditions precedent to

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LLOYD GRANET

the admission of such assignee as a substitute Member. The transfer by such trustee, receiver, executor, administrator, committee, guardian or conservator of any Membership Interest shall be subject to all of the restrictions, hereunder to which such transfer would have been subject if such transfer had been made by such bankrupt, deceased, dissolved, liquidated, terminated or incompetent Member. The foregoing shall apply to the extent permitted by applicable law.

#### ARTICLE VII AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of Halcyon Hills L.L.C. certifies:

1) the above named limited liability company has at least one member; 2) the total amount of cash contributed by the members is 3) if any, the agreed value of property other than cash contributed by members 4) the total amount of cash and property contributed and anticipated to be	\$1,00 ——	00; ;	
contributed by members	<u> \$1;86</u>	30;	
Signature of a member or an authorized representative of a member of an authorized representative of a member of the accordance with Section 608.408(3), Florida Statutes, the excordance with	ecution	99 мау	SEÇ
Bernadette Castro Typed or printed name of signee		NY 12 AM 11: 32	FILED RETARY OF STATE N OF CORPORATIONS

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## CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATED A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: Halcyon Hills L.L.C.

2. The name and the Florida street address of the registered agent is:

Lloyd Granet, Esquire

1900 N.W. Corporate Boulevard

Suite 100, West Building

Boca Raton, Florida 33431

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 property and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent.

SIGNATURE

Filing Fee: \$35 for Designation of Registered Agent

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