ACCOUNT NO. : 07210000032

REFERENCE: 479892 7197679

AUTHORIZATION:

COST LIMIT : \$ 125.00

ORDER DATE: November 12, 1999

ORDER TIME: 12:06 PM

ORDER NO. : 479892-005

CUSTOMER NO: 7197679

CUSTOMER: Mr. Anthony Mechachonis

ANTHONY MECHACHONIS ANTHONY MECHACHONIS

Suite 700

500 Australian Avenue

West Palm Beach, FL 33401

DOMESTIC FILING

NAME: 29 NORTHWOOD L.L.C.

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

XX PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janine Lazzarini

EXAMINER'S INITIALS:

99 NOV 12 PM 1: 4

400003043004

99 NOV 12 AM 9: 31

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

A	$\mathbf{R}'$	ΓŢ	CT.	Æ.	T	- N	<b>Vam</b>	e:

The name of the Limited Liability Company is:

29 Northwood L.L.C.

## **ARTICLE II - Address:**

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

3001 Spruce Ave.

West Palm Beach, Florida 33407

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

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

Ant]	nony	Mechac!	honi	s, Esqui	re
500	Aus	Na tralian	me Ave	. Suite	700
Florid Wes	a street L Pa	address (P.C Lm Beacl	D. Box I	NOT accepta	ıble)
		City, State			

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..

Article IV	- Management (	(Check)	box if	f applica	ible.

The Limited Liability Company is to be managed by one manager or more manager therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Signature of a member or an 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.)

Anthony Mechachonis

Typed or printed name of signee

## FILING FEES:

- \$ 100.00 Filing Fee for Articles of Organization
- \$ 25.00 Designation of Registered Agent
- 30.00 Certified Copy (OPTIONAL)
  5.00 Certificate of Status (OPTIONAL)