

Division of Corporations

Page 1 of 2

L010000003289

Florida Department of State  
Division of Corporations  
Public Access System  
Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

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.

(((H01000023426 9)))

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) 922-4003

From:  
Account Name : BOOSE, CASEY, CIKLIN, ET AL  
Account Number : 076376001447  
Phone : (561) 832-5900  
Fax Number : (561) 833-4209

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 MAR -5 AM 10: 51

FILED

AL

LIMITED LIABILITY COMPANY

1617 Associates, LLC

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 MAR -5 AM 10: 07

RECEIVED

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

((H010000234269))

ARTICLES OF ORGANIZATION  
OF  
1617 ASSOCIATES, LLC

I, the undersigned natural person competent to contract, hereby organize and form a limited liability company under and pursuant to Chapter 608, Florida Statutes as follows:

01 MAR -5 AM 10:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

ARTICLE 1.

Name of Limited Liability Company

The name of this limited liability company shall be 1617 Associates, LLC.

ARTICLE 2.

Period of Duration

The existence of the Company shall be perpetual from the date of filing these Articles with the Department of State unless terminated by vote of the members.

ARTICLE 3.

Purpose

The Company is organized for the purpose of transacting any and all lawful business which limited liability companies may transact pursuant to Chapter 608, Florida Statutes.

ARTICLE 4.

Place of Business

The street address and mailing address of the initial business office of the Company is 515 N. Flagler Drive, 18<sup>th</sup> Floor, West Palm Beach, Florida 33401. The Company shall have the privilege of having offices at other places within or without the State of Florida and within or without the United States of America. The Company may, at its discretion, at any time, change the address of its place of business.

((H010000234269))

((H010000234269))

ARTICLE 5.

Name and Address of Registered Agent

The name of the initial registered agent is Dean Vegosen and the registered agent's address is 515 N. Flagler Drive, 515 N. Flagler Drive, West Palm Beach, Florida 33401.

ARTICLE 6.

Investment in Company

The total amount of cash to be contributed to the Company upon its formation is Forty Thousand Dollars (\$40,000.00), which is to be contributed in equal shares by the initial four (4) members of the Company. No property other than cash shall be contributed initially.

ARTICLE 7.

Additional Members

Additional members may be admitted to the Company upon such terms and conditions as shall be established by the then-existing members.

ARTICLE 8.

Continuation of Business

The remaining members of the Company shall have the right to continue the business of the Company on the death, retirement, resignation, expulsion, bankruptcy or dissolution of any member or upon the occurrence of any other event which terminates the continued membership of a member in the Company.

ARTICLE 9.

Management

The Company shall be managed by one or more managers, who may or may not be members of the Company.

01 MAR -5 AM 10:51  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

FILED

((H010000234269))

ARTICLE 11.

Indemnification of Members and Manager

Except in the case of gross negligence or willful or wanton behavior, the Company shall indemnify and save harmless every manager and member of the Company from all costs and expense incurred by him, her or it in connection with the defense of any action, suit or proceeding, whether civil or criminal, in which he, she or it is made a party as a result of having been a member or manager of this Company.

In witness of the foregoing, I have hereunto set my hand and seal this 5 day of March, 2001.

*Dean Vegosen*  
\_\_\_\_\_  
Dean Vegosen

STATE OF FLORIDA

COUNTY OF PALM BEACH

Before me personally came and appeared Dean Vegosen, who is personally known to me and who executed the foregoing instrument and acknowledged to and before me that he executed said instrument for the purposes therein expressed.

WITNESS my hand and official seal in the County and State last aforesaid this 5 day of March, 2001.

*Jeanne Applington*  
\_\_\_\_\_  
Notary Public  
State of Florida at Large



Jeanne Applington  
MY COMMISSION # CC822041 EXPIRES  
August 12, 2003  
BONDED THRU TROY FARM INSURANCE, INC.

01 MAR -5 AM 10:51  
FILED  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

((H010000234269))

((H010000234269))

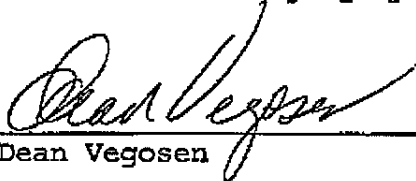
**CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.**

In pursuance of Chapter 608, Florida Statutes, the following is submitted, in compliance with said Act:

That 1617 Associates, LLC, desiring to organize as a limited liability company under the laws of the State of Florida with its principal office, as indicated in the Articles of Organization, has named Dean Vegosen, located 515 N. Flagler Drive, 18<sup>th</sup> Floor, City of West Palm Beach, County of Palm Beach, State of Florida, as its agent to accept service of process within this state.

**ACKNOWLEDGMENT:**

Having been named to accept service of process for the above stated limited liability company, at the place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

  
\_\_\_\_\_  
Dean Vegosen

01 MAR -5 AM 10:51  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

FILED

((H010000234269))