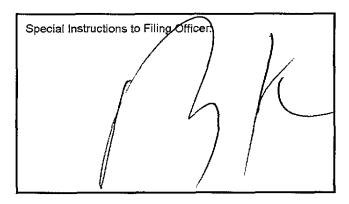
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	(Red	questor's Name)	
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Certified Copies		Certificates	of Status



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CORPORATION SERVICE COMPANY

ACCOUNT	NO		072100000032
ACCOUNT.	TAO *	-	0/2100000000

REFERENCE: 933315

AUTHORIZATION: 6

COST LIMIT : \$ 125.00

ORDER DATE: October 19, 2004

ORDER TIME : 1:42 PM

ORDER NO. : 933315-005

CUSTOMER NO: 4323958

CUSTOMER: Mr. Bruce Vanyek

Chuhak & Tecson, P.c.

Suite 2600

30 S. Wacker Drive Chicago, IL 60606

ARTICLES OF INCORPORATION

DOMESTIC FILING

NAME: 117 LAKE AVENUE PROPERTY, LLC

EFFECTIVE DATE:

	CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION
PLEASE	RETURN THE FOLLOWING AS PROOF OF FILING:
XX	CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING
CONTACT	PERSON: Susie Knight - EXT. 2956

EXAMINER'S INITIALS:

ACCURACY SEE, FLORE

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANATIOLE I - Name:

The name of the Limited Liability Company is:

117 Lake	A٦	anue	Prop	perty	LLC		

ARTICLE II - Address:

Principal Office Address:

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

Mailing Address:

2837 Sheridan Place	2837 Sheridan Place
Evanston, IL 60201	Evanston, IL 60201

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

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

Salomon J. Dayan		
Na	me	·
980 S. Ocean Blvd.		
Florida street	address (P.O	. Box <u>NOT</u> acceptable)
Palm Beach,	FL	33480
City, Sta	ite, and 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 608, F.S..

(CONTINUED)

Registered Agent's Signature

Page 1 of 2

A POTTOT K	W- Man	ager(s) o	r Managing	Member	(s):
ANILLE	TATION TATION	IARCI (8) O	i ivianarini	TATCHING!	(2).

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager	Name and Address:
"MGRM" = Managing Member	
MGR	Salomon J. Dayan 2837 Sheridan Place
	Evanston, IL 60201
MGR	Adam Dayan
	2837 Sheridan Place
	Evanston, IL 60201
(Use attachment if necessary)	
NOTE: An additional article must	be added if an effective date is requested.
REQUIRED SIGNATURE:	
X of m	A goya-
Signature of a membe	er or an authorized representative of a member.
(In accordance with se of this document const that the facts stated	ection 608.408(3), Florida Statutes, the execution titutes an affirmation under the penalties of perjury herein are true.)
Salomon J. I	Dayan
<u> </u>	yped or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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