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LIMITED LIABILITY COMPANY

509 6th ave North LLC

Certificate of Status	0
Certified Copy	1
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ARTICLES OF ORGANIZATION
OF
509 6th ave North LLC

ARTICLE I NAME

The name of the limited liability company shall be: **509 6th ave North LLC**

ARTICLE II PRINCIPAL OFFICE

The principal place of business and mailing address of this Limited Liability Company shall be: 18851 NE 29th Ave 7th Floor, Aventura , Florida 33180.

ARTICLE III INITIAL REGISTERED AGENT & STREET ADDRESS

The name and address of the initial registered agent is: Business Filings Incorporated, 1203 Governors Square Blvd., Suite 101, Tallahassee, Florida 32301-2960. Located in the County of Leon.

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ARTICLE IV DURATION

The duration for the limited liability company shall be: 12/31/2045.

ARTICLE V MANAGERS/MEMBERS

The management of the limited liability company is reserved for the Members and the names and addresses of the members of the Limited Liability Company are:

Richard Ehrlich, 18851 NE 29th Ave., 7th Floor, Aventura, Florida 33180
Benny Gammerman, 3640 Yacht Club Dr., # 901, Aventura, Florida 33180

Business Filings Incorporated, Organizer
Mark Schiff, AVP
Authorized Representative
Prepared by Mark Schiff, Business Filings Incorporated, 8025 Excelsior Dr., Suite 200, Madison, WI 53717
(608) 827-5300

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN *DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE* STATE OF FLORIDA.

The name of the limited liability company is: **509 6th ave North LLC**

The name and address of the registered agent and office is Business Filings Incorporated, 1203 Governors Square Blvd., Suite 101, Tallahassee, Florida 32301-2960. Located in the County of Leon.

Having been named as registered agent and to accept service of process for the above stated 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.

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Signature: _____ Date: November 28, 2005

Mark Schiff, AVP
Business Filings Incorporated