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Florida Department of State
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To:

Division of Corporations
Fax Number : (850)205-0383

From:

Account Name : SHUTTS & BOWEN, LLP
Account Number : 076447000313
Phone : (305)358-6300
Fax Number : (305)381-9982

FILED
2006 OCT 18 A 10:28
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

1075 NE 125th Street, LLC

RECEIVED
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DIVISION OF CORPORATION

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

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Fax Audit # (((H06000255035 3)))

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**ARTICLE I - Name:**

The name of the Limited Liability Company is:

1075 NE 125th Street, LLC

(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviation "LLC" or "L.C.")

ARTICLE II - Address:

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

Principal Office Address:1075 NE 125 Street
North Miami, FL 33161Mailing Address:1075 NE 125 Street
North Miami, FL 33161**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature**
(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

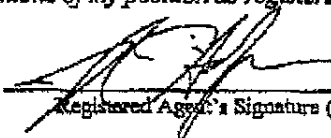
Richard S. Hoffman

Name

1075 NE 125 StreetFlorida street address (P.O. Box **NOT** acceptable)North Miami FL 33161

City, State, 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.



Registered Agent's Signature (REQUIRED)

(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):

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

Title:

"MGR" = Manager

"MGCOM" = Managing Member

Name and Address:

MGR

Richard S. Hoffman
 1075 NE 125 Street
 North Miami, FL 33161

MGR

Terri Buchalter
 1075 NE 125 Street
 North Miami, FL 33161

MGR

Kenneth J. Dorchak
 1075 NE 125 Street
 North Miami, FL 33161

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: October 28, 2006 (OPTIONAL)
 (If an effective date is listed, the date must be specific and cannot be more than five business day to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

 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.)

Richard S. Hoffman
 Typed or printed name of signer

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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