

07/21/2008 16:37 FAX (215) 979386

M. BURR KEIM COMPANY

W08000069774

Florida Department of State
Division of Corporations
Public Access System

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.

((H08000177646 3)))



H080001776463ABCS

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) 617-6383

From:

Account Name : M. BURR KEIM COMPANY
Account Number : 119990000242
Phone : (215) 563-8113
Fax Number : (215) 977-9386

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2008 JUL 21 AM 8:15

FILED

FLORIDA/FOREIGN LIMITED LIABILITY CO.

1407 TDR TOWER II, LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

T. CLINE

JUL 22 2008

EXAMINER
Help

Electronic Filing Menu

Corporate Filing Menu

RECEIVED

08 JUL 21 AM 6:33

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

(((H08000177646 3)))

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

The name of the Limited Liability Company is:

1407 TDR TOWER II, LLC

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

ARTICLE II - Address:

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

Principal Office Address:1001 Grand Avenue
Asbury Park, NJ 07712**Mailing Address:**P.O. Box 454
Ocean Grove, NJ 07756**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:

W. Bradley Munroe, Esquire

Name

239 E. Virginia StreetFlorida street address (P.O. Box NOT acceptable)Tallahassee FL 32301

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)

Page 1 of 2

(((H08000177646 3)))

(((H08000177646 3)))

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:MGRMPatrick SchiavinoP.O. Box 454Ocean Grove, NJ 07756MGRMPatrick Sasano1001 Grand AvenueAsbury Park, NJ 07712MGRMCarl BranciforteP.O. Box 632New Brunswick, NJ 08903

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(If an effective date is listed, the date must be specific and cannot be more than five business days prior 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.)

Robert Worthington, Authorized Person

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)

(((H08000177646 3)))