L15000179161

Florida Department of State

Division of Corporations

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.

(((H15000177280 3)))

H15000177280 3ABC+

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

15 JUL 21 PM 4:44

To:

Division of Corporations
Fax Number : (850)617-6381

From:

Account Name : WHITE & CASE
Account Number : 075410002143
Phone : (305)371-2700
Fax Number : (305)358-5744

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: CLIFF@SANITARCOMPANIES.COM

FLORIDA LIMITED LIABILITY CO.

14 White Street Owner-AM, LLC

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	$155.00

FILED
15 JUL 21 AM 8:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1539315 -0025
ATTN MBW

ARTICLES OF ORGANIZATION

OF

14 WHITE STREET OWNER-AM, LLC

Pursuant to Section 605.0201 of the Florida Statutes, the undersigned hereby files these Limited Liability Company Articles of Organization as follows:

ARTICLE I - NAME

The name of the Company is 14 White Street Owner-AM, LLC.

ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is 5345 Pine Tree Drive, Miami Beach, Florida 33140.

ARTICLE III - INITIAL REGISTERED AGENT

The street address of the initial Registered Office of this Company in the State of Florida shall be 5345 Pine Tree Drive, Miami Beach, Florida 33140. The name of the initial Registered Agent of this Company at the above address shall be Clifford M. Stein.

ARTICLE IV - DURATION

The period of duration for the Limited Liability Company is perpetual.

IN WITNESS WHEREOF, the undersigned authorized representative has hereunto set his hand and seal this 21 day of July, 2015.

Clifford M. Stein, Authorized Representative

FILED
15 JUL 21 AM 8:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CERTIFICATE DESIGNATING REGISTERED AGENT AND REGISTERED OFFICE

Pursuant to the provisions of Section 605.0113, Florida Statutes, the undersigned submits the following statement in designating the registered office/registered agent:

14 White Street Owner-AM, LLC desiring to organize as a limited liability company under the laws of the State of Florida has designated 5345 Pine Tree Drive, Miami Beach, Florida 33140, as registered office and named Clifford M. Stein as the initial registered agent.

By: _____
Clifford M. Stein
Authorized Representative

Having been named Registered Agent for the above stated limited liability company, at the designated Registered Office, the undersigned hereby accepts said appointment and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of the undersigned's duties, and the undersigned is familiar with and accepts the obligations of the undersigned's position as registered agent as provided for in Section 605.0113, Florida Statutes.

By: _____
Clifford M. Stein
Registered Agent

FILED
15 JUL 21 AM 8:42
SECRETARY OF STATE
TALLAHASSEE, FLORIDA