

Division of Corporations

L000000005310

Florida Department of State
Division of Corporations
Public Access System
Katherine Harris, Secretary of State

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.

((H00000025809 5)))

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) 922-4003

From:
Account Name : RUDEN, MCCLOSKEY, SMITH, SCHUSTER & RUSSELL, P.A.
Account Number : 076077000521
Phone : (954) 761-2910
Fax Number : (954) 764-4996

RECEIVED

00 MAY -9 PM 2:07

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIMITED LIABILITY COMPANY

620 Lenox Avenue Associates, L.C.

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

FILED
00 MAY -9 AM 10:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

400-258095

**ARTICLES OF ORGANIZATION
OF
620 LENOX AVENUE ASSOCIATES, L.C.
a Florida Limited Liability Company**

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a Limited Liability Company under the laws of the State of Florida do set forth the following:

1. NAME. The name of the Limited Liability Company is 620 LENOX AVENUE ASSOCIATES, L.C. (the "Company").

2. MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE. The mailing and street address of the principal office of the Company is: ~~1400 Ocean Drive~~, Miami Beach, Florida 33139.
1300 Collins Avenue

3. REGISTERED AGENT. The name and address of the initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization, is: Mel Schlessor, ~~1400 Ocean Drive~~, Miami Beach, Florida 33139.
1300 Collins Avenue

4. MANAGER. The Company is to be a manager-managed Company.

The undersigned has executed these Articles of Organization on the 8th day of May, 2000.

By: 
Mel Schlessor, Member

FILED
00 MAY -9 AM 10:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

400-258095

H00-25809 5

**CERTIFICATION OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: 620 LENOX AVENUE ASSOCIATES, L.C.
2. The name and address of the registered agent and office is:

Mel Schlessor
~~4400 Ocean Drive~~ 1300 Collins Avenue
Miami Beach, Florida 33139

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 its 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.



Mel Schlessor, Registered Agent

Date: May 8, 2000

FILED
00 MAY -9 AM 10:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H00-25809 5