CAPITAL CONNECTION, INC.  417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222  Andrews Avenue Progenties +  Thurs buents, CIC	000003492080-1 -12/08/0001080-010 ****160.00 *****160.00
Signature  NOIL  Requested by:  LM 12/8   Most	Art of Inc. File  LTD Partnership File  Foreign Corp. File  L.C. File  L.C. File  Cert + Stat  Fictitious Name File  Trade/Service Mark  Merger File  Art. of Amend. File  RA Resignation  Dissolution / Withdrawal  Annual Report / Reinstatement  Cert. Copy  Photo Copy  Certificate of Good Standing  Certificate of Fictitious Name  Corp Record Search  Officer Search  Fictitious Search  Fictitious Owner Search  Fictitious Owner Search  Driving Record  July 100  UCC 1 or 3 File  UCC 11 Search  DUSTING DO  UCC 11 Search
Name Date Time	UCC 11 Retrieval
Walk-In Will Pick Up	Courier

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

Andrews Avenue Properties & Investments, L.L.C.

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 888 Southeast Third Avenue, Suite 501, Fort Lauderdale, Florida 33316.

# ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and street address of the registered agent are:

Miles Austin Forman
Name
888 Southeast Third Avenue, Ste. 501
Florida street address (P.O. Box <u>NOT</u> acceptable)
Fort Lauderdale, Florida 33316
City, State, Zip

Having been named as registered agent and to accept service of process for the above state 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 statues relating to the proper and complete performance of my duties, and Lam familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature

### ARTICLE IV - Management: (Check box if applicable,)

^	manage	mited Liability Company is to be man er - managed company.	aged by one manager or managers and is, therefore, a
Manag		William M. Murphy 4300 N. University Dr., Ste. D-103 Fort Lauderdale, Florida 33351	Miles Austin Forman 888 Southeast Third Ave., Ste. 501 Foft Landerdale, Florida 33316

Signature of a member or an authorized representative of a member (In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Typed or printed name of signee

AND FILED