

Florida Department of State

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

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To:

Division of Corporations

Fax Number : (850) 922-4003

From:

Account Name : AKERMAN, SENTERFITT & EIDSON, P.A.

Account Number : 075471001363 Phone : (305)374-5600

Fax Number : (305)374-5095

LIMITED LIABILITY COMPANY

MELHAN, LLC

Certificate of Status	0
Certified Copy	11
Page Count	01
Estimated Charge	\$155.00



ARTICLES OF ORGANIZATION OF MELHAN, LLC

ARTICLE I: - Name

The name of the Limited Liability Company is: Melhan, LLC

ARTICLE II: - Address

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

1200 Lincoln Road Suite 200 Miami Beach, FL 33139

ARTICLE III: - Registered Agent, Registered Office, & Registered Agent's Signature The name and the Florida street address of the registered agent are:

Jacqueline Simkin 1200 Lincoln Road Suite 200 Miami Beach, FL 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 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.

Jacqueline Simkin Registered Agent

ARTICLE IV: - Management (Check box if applicable.)

☐ The Limited Liability Company is to be managed by one or more members and is, therefore, a member - managed company?

guature of member or an authorized representative of a member.

(In accordance with section §608(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Jacqueline Simkin
Typed or printed name of signee

Dated this 3 day of April, 2001