



# L01000015744

ACCOUNT NO. : 072100000032

REFERENCE : 472254 121767A

AUTHORIZATION : *Patricia Pizoto*

COST LIMIT : \$ 125.00

ORDER DATE : September 14, 2001

ORDER TIME : 10:15 AM

ORDER NO. : 472254-005

CUSTOMER NO: 121767A

CUSTOMER: Ms. Heather Irving  
Karp & Genauer, P.a.

Suite 1202  
2 Alhambra Plaza  
Coral Gables, FL 33134

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DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
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TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

DOMESTIC FILING

NAME: HT SERVICES PALM BEACH, LLC

EFFECTIVE DATE:

800004588508--6

ARTICLES OF INCORPORATION  
CERTIFICATE OF LIMITED PARTNERSHIP  
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY  
XX PLAIN STAMPED COPY  
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Sara Lea -, EXT. 1114

EXAMINER'S INITIALS:

01 SEP 14 PM 12:17  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED

*SB*  
*9-14*

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

**HT SERVICES PALM BEACH, LLC**

## ARTICLE II - Address:

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

**3225 Aviation Ave., PH Suite  
Coconut Grove, FL 33133**

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

The name and the Florida street address of the registered agent are:

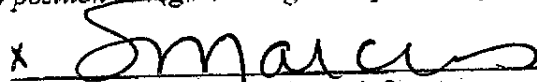
**Stewart Marcus, c/o Housing Trust Group**

Name  
**3225 Aviation Ave., PH Suite**

Florida street address (P.O. Box **NOT** acceptable)  
**Coconut Grove FL 33133**

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.*

x   
Registered Agent's Signature  
**Stewart Marcus**

## Article IV - Management (Check box if applicable.)

☒ The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

**JAG VENTURES, Ltd., Member, by its general partner JAG Investors, Inc.**

~~(An additional authorized signatory is hereby designated as follows: [Name], [Address], [City, State, Zip], effective [Date].)~~

x By:   
Signature of a member or an authorized representative of a member.  
**Stewart Marcus, President**

(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.)

**Stewart Marcus as President of JAG Investors, Inc., the**  
Typed or printed name of signee  
**general partner of JAG Ventures, Ltd., a Member**

### Filing Fees:

**\$100.00** Filing Fee for Articles of Organization  
**\$ 25.00** Designation of Registered Agent  
**\$ 30.00** Certified Copy (Optional)  
**\$ 5.00** Certificate of Status (Optional)

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
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