Division of Corporations



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)205-0383

AL

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

: (305)634-3694

Phone

: (305)633-9696 Fax Number

LIMITED LIABILITY COMPANY

1233 N.E. FIRST AVENUE, LLC

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$160.00

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ARTICLES OF ORGANIZATION

FOR

1233 N.E. FIRST AVENUE, LLC

ARTICLE I. - NAME:

The name of this Limited Liability Company ("Company") shall be:

1233 N.E. FIRST AVENUE, LLC

ARTICLE II. - ADDRESS

The mailing address and street address of the principal office of the Company is: c/o Avra Jain, 226 West Rivo Alto, Miami Beach, Florida 33139.

ARTICLE III. - DURATION

The period of duration for the Company shall be perpetual unless dissolved according to law.

ARTICLE IV. - MANAGEMENT

The Company is to be managed by: a manager or managers and the name(s) and address of such managers are:

Avra Jain 226 West Rivo Alto Miami Beach, Florida 33139

Peter Schwalbe 185 Madison Avenue Suite 1700 New York, NY 10016

ARTICLE V. - ADMISSION OF ADDITIONAL MEMBERS

The right of the members to admit additional members and the terms and conditions of the admissions shall be: new members may be admitted from time to time and upon such terms and conditions as shall be determined by a unanimous vote of the holders of all of the Membership Interests.

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SECRETARY OF STATE
TALLAHASSEE, FLORID

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ARTICLE VL - MEMBERS RIGHTS TO CONTINUE HUSINESS

The right of the members of the Company to continue the business on the death, retirement, resignation, expulsion, bankruptey, or dissolution of a member or the occurrence of any other event which terminates the continual membership of a member in the Company shall be: determined by a unanimous vote of the remaining holders of all of the Membership Interests to continue to conduct the business of the Company under the Company's name.

Signature of a member or an authorised representative of a member.

Ayrs Join
Typed or printed name of signed
Date 1107-101

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SECRETARY OF STATE

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

FURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: 1233 N.E. FIRST AVENUE, LLC
- The name and the Florida street address of the registered agent are:

. . .

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PEDRO A. MARTIN, ESO.
NAME

Greenberg Traurig, P.A.

1221 Brickell Avenuc, Suite 2100

Florida street address (P.O. BOX NOT ACCEPTABLE)

Miami, Florida 33131 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.

IGNATURE

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