

CT CORPORATION SYSTEM

CORPORATION(S) NAME

LD10000021967

(1) 6204 14th St. W., LLC

(2) 420 N. Main St., LLC

(3) 12015 Little Rd., LLC

(4) 1111 Tamiami Tr., LLC

(5) 2390 Belcher Rd., LLC

(6) 2480 Tamiami Tr., LLC

500004730595--3

12/18/01--01045--015

****125.00 ****125.00

☐ Profit

☐ Amendment

☐ Merger

☐ Nonprofit

☐ Dissolution/Withdrawal

☐ Mark

☐ Foreign

☐ Reinstatement

☐ Other

☒ Limited Partnership

☐ Annual Report

☐ Change of RA

☒ LLC

☐ Name Registration

☐ UCC

☐ Certified Copy

☐ Photocopies

☐ CUS

☐ Call When Ready

☐ Call If Problem

☐ After 4:30

☒ Walk In

☐ Will Wait

☒ Pick Up

☐ Mail Out

Name

12/18/01

Order#: 4994260

Availability _____

Document

Examiner _____

Updater _____

Verifier _____

W.P. Verifier _____

Ref#: _____

Amount: \$ _____

660 East Jefferson Street
Tallahassee, FL 32301
Tel. 850 222 1092
Fax 850 222 7615

RECEIVED
01 DEC 18 PM 1:06
DIVISION OF STATE
TALLAHASSEE, FLORIDA

01 DEC 18 PM 2:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

APPROVED
FILED

12-18-01

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

1111 Tamiami Tr., LLC

ARTICLE II - Address:

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

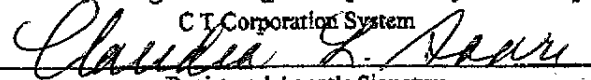
One Towne Square, Suite 1913, Southfield, MI 48076

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

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

C T Corporation System	
Name	
c/o CT Corporation System, 1200 South Pine Island Road	
Florida street address (P.O. Box <u>NOT</u> acceptable)	
Plantation	FL 33324
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 provided for in Chapter 608, F.S.

C T Corporation System


Registered Agent's Signature

Claudia L. Seaton
Asst. Secretary

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.


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

(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.)

Irving R. Seligman as Trustee of the
Irving R. Seligman RLT dtd 12/15/89

Typed or printed name of signee

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

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AND
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