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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

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone

1 (305)634-3694

Fax Number

: (305)633-9696

LIMITED LIABILITY COMPANY

15 nw, llc

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

DIVISION OF CORPORATION

02

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This instrument was prepared by: David M. Goldstein, Esq. 200 S. Biscayne Boulevard Suite 1880 Miangi, Florida 33131

ARTICLES OR ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I

The name of the Limited Liability Company is: 15 NW, LLC.

ARTICLE II

The mailing address and street address of the principal office of the Limited Liability

Company is:

c/o David M. Goldstein, Esq. 200 S. Biscayne Boulevard, Suite 1880 Miami, Florida 33131

ARTICLE III

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

David M. Goldstein, Esq. 200 S. Biscayne Boulevard, Suite 1880 Miami, Florida 33131

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 an complete performance of my duties, and I familiar with an accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

Registered Agent's Signature

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ARTICLE IV

The Limited Liability Company is to be managed by one or more managers and is therefore, a managed company by the following individual(s):

Alvin Malnik, Manager

Signature of a member or 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.)

STATE OF FLORIDA COUNTY OF MIAMI-DADE

The foregoing instrument was acknowledged before me this 12th day of March, 2002, by

, who is personally known to me.

NOTARY PUBLIC, State of Florida

My Commission expires:

LILLIAM MARTELL My Comm Exp. 7/28/2002 No. CC 763119 naly Known (10ther), D.

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

15 NW, LLC.

2. The name and address of the registered agent and office is:

DAVID M. GOLDSTEIN, ESQUIRE 200 S. BISCAYNE BOULEVARD, SUITE 1880 MIAMI, FLORIDA 33131

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.

(Signature)

(Date)

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