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Fax Number

: (850)205-0383

From:

Account Name : LLOYD GRANET Account Number : 074632001025 Phone (561) 999-9300 Fax Number : (561)999-9400

LIMITED LIABILITY COMPANY

NORTH SPRINGS PLAZA L.L.C.

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

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ARTICLES OF ORGANIZATION FOR LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is: NORTH SPRINGS PLAZA L.L.C.

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 11555 Heron Bay Boulevard, Suite 300, Coral Springs, FL 33076

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
The name and the Florida street address of the registered agent are:
Lloyd Granet, P.A., 2295 NW Corporate Boulevard, Suite 135 West, Boca Raton, FL
33431

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 60&FeS.

By: Lloyd Granet, Esq. - Registered Agent's Signature

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 608.403(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true).

Lloyd Granet
Typed or printed name of signee

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