Division of Corporations

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Florida Department of State

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To:

Division of Corporations

Fax Number

1 (850) 205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 : (305) 634-3694 Phone Fax Number : (305) 633-9696

LIMITED LIABILITY COMPANY

fs biscayne holdings, llc

Certificate of Status	0
Certified Copy	1
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Estimated Charge	\$155,00

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ARTICLES OF ORGANIZATION

FOR

FS BISCAYNE HOLDINGS, LLC

ARTICLE I. - NAME:

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

FS BISCAYNE HOLDINGS, LLC

ARTICLE II. - ADDRESS

The mailing address and street address of the principal office of the Company is: 13305 Provence Drive, Palm Beach Gardens, FL 33410.

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 manager(s) of the Company. The initial manager of athe Company is:

Franklin Schachter 13305 Provence Drive Palm Beach Gardens, FL 33410

Signature of a member or an authorized representative of a member

(In accordance with section 602.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Franklin Schachter

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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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: F8 BISCAYNE HOLDINGS, LLC
- 2. The name and the Florida street address of the registered agent are:

TAMARA FISHER NAME

173 Root Trail Florida street address (2.0, BOX NOT ACCEPTABLE)

Palm Beach, Florida 33480 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.

Tamara fisher