# L03000002882

(Re	equestor's Name)	
(Ac	ddress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Bi	usiness Entity Na	me)
(Di	ocument Number	· · · · · · · · · · · · · · · · · · ·
(Di	Journelli Number	,
Certified Copies	Certificate	es of Status
Special Instructions to	Filing Officer:	
		•
-	-1/	
Nome ' ubility		
i van <del>ja nastata</del>		
	DCC .	
The second se		
	Office Use O	nly
- %-	e e geginning saka dan manasasas	
	act	
	bee	



600010079336

BIVISION OF CAR DEATION

03 JAN 23 PH 2: 29
SECRETARY OF STATE
STATE OF STATE

FILED

23 M 2: 42 0



ACCOUNT NO. : 07210000032

REFERENCE : 902096 7364583

AUTHORIZATION :

COST LIMIT : 19 145160 14 45

ORDER DATE: January 21, 2003

ORDER TIME : 11:17 AM

ORDER NO. : 902096-001

CUSTOMER NO: 7364583

CUSTOMER: Mr. Adam J. Hardej

Mr. Adam J. Hardej

203 Club Drive

Palm Beach Gard, FL 33418-7012

DOMESTIC FILING

NAME: MONTGOMERY WILSHIRE CAPITAL OF

MIAMI LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

XX PLAIN STAMPED COPY

CONTACT PERSON: Norma Hull - EXT. 1115

EXAMINER'S INITIALS:

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ART	TOT	FI	_ N	lame:
~ · · ·		ا نا،	. – 11	anne

The name of the Limited Liability Company is:

MONTGOMERY WILSHIRE CAPITAL OF MIAMI LLC

# **ARTICLE II - Address:**

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

203 Club Drive, Palm Beach Gardens, FL 33418-7012

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

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

Adam J. Ha	ardej		
Name			
	Orive		
Florida street address (P.O	. Box <u><b>NO</b>′</u>	T acceptable)	The service
Palm Beach Gardens,	FL	33418-7012	55 <b>3</b>
City, State,	and Zip		
t the place designated in this certified agree to act in this capacity. If the proper and complete performations of my position as registered against J. Hardej	ficate, I l urther ag ance of m	hereby accept the app gree to comply with t my duties, and I am fa	pointment as the provisions of all amiliar with and
	t's Signatu	re	<del>-</del> .
Signature of a member or an author (In accordance with section 608.408)	rized repr	esentative of a member	<u>-</u> r.
			-
	Name  203 Club I  Florida street address (P.O  Palm Beach Gardens, City, State,  d as registered agent and to accept the place designated in this certi d agree to act in this capacity. If the proper and complete performe ons of my position as registered ag  Adam J. Hardej  By: Adam J. Hardej  Registered Agen  In additional article must be added  Signature of a member or an author  (In accordance with section 608.408 of this document constitutes an affirm that the facts stated herein are true.)  Deborah D.	Florida street address (P.O. Box NO'  Palm Beach Gardens, FL City, State, and Zip  d as registered agent and to accept service t the place designated in this certificate, I h d agree to act in this capacity. I further ag the proper and complete performance of m ons of my position as registered agent as pro Adam J. Hardej By: Adam J. Hardej Registered Agent's Signature an additional article must be added if an eff Signature of a member or an authorized repr (In accordance with section 608.408(3), Florida of this document constitutes an affirmation und that the facts stated herein are true.)	Name  Florida street address (P.O. Box NOT acceptable)  Palm Beach Gardens, FL 33418-7012  City, State, and Zip  d as registered agent and to accept service of process for the abit the place designated in this certificate, I hereby accept the apid agree to act in this capacity. I further agree to comply with the proper and complete performance of my duties, and I am forms of my position as registered agent as provided for in Chapter Adam J. Hardej  By: Adam J. Hardej  Registered Agent's Signature  In additional article must be added if an effective date is requested.  Signature of a member or an authorized representative of a member of this document constitutes an affirmation under the penalties of perjunctions.

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)

#### MONTGOMERY WILSHIRE CAPITAL OF MIAMI LLC

Adam J. Hardej - MGRM 203 Club Drive Palm Beach Gardens, FL 33148-7012

Michael R. Bowden - MGRM 3111 North University Drive, Unit 725 Coral Springs, FL 33065

D3 JAN 23 PM 2: 29
SECRETARY OF STATE

#### LIMITED POWER OF ATTORNEY

The undersigned hereby designates Corporation Service Company ("CSC"), a Delaware corporation qualified to do business in the State of Plorida, as its attorney-in-fact for the limited purpose of executing on behalf of the undersigned the original Articles of Organization of MONTGOMERY WILSHIRE CAPITAL OF MIAMI LLC (the "LLC"), a Florida limited liability company, for the further purpose of filing such Articles of Organization with the State of Florida Department of State, and for no other purpose. The power granted hereby shall be exercisable and effective upon execution of the Limited Power of Attorney by the undersigned and upon delivery of the original or a copy thereof by facsimile or other means to CSC. This grant of power shall be revoked immediately after the filing of the Articles of Organization of the LLC with the State of Florida Department of State. All parties who review the original or a copy of this Limited. Power of Attorney may rely upon it and the exercise of the limited power granted herein without making further inquiry as to the matters described herein or the authority of CSC to act hereunder.

This Limited Power of Attorney is executed on this 23 day of January , 2003.

Michael Bowden

Print Name of Witness