

L03 000009213

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H03000079903 8)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

LIMITED LIABILITY COMPANY

atlantic 405 l.l.c.

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

L03-9213
JH

H030000079903

(4)

ARTICLES OF ORGANIZATION
OF
ATLANTIC 405 L.L.C.

These Articles of Organization are made for the purpose of organizing a Florida Limited Liability Company under the Florida Limited Liability Company Act (Florida Statutes Chapter 608).

1. **Name.** The name of the limited liability company is **ATLANTIC 405 L.L.C.**
2. **Duration.** The Company shall exist from the date of filing these Articles with the Department of State until the occurrence of any of the events specified in Florida Statutes Section 608.441, unless continued by the unanimous consent of all of the remaining members.
3. **Mailing Address and Street Address.** The Company's mailing and street address is:
1651 N.E. 196TH STREET, N. MIAMI BEACH, FL. 33160.
4. **Registered Agent and Office.** The name of the initial registered agent of the Company is Sadia Chocron. The street address of the initial registered agent of the company is:
1651 N.E. 196th Street, N. Miami Beach, FL. 33160.
5. **Additional Members.** Additional members to the Company may be admitted, but only if all the current members agree to the admission of the additional members and to the terms of admission.

Prepared by: Richard Wasserstein

Wasserstein Law Building

913 Normandy Drive (71 St. Street)

Miami Beach, Florida 33141

H030000079903

6. Termination of Membership. If a member of the Company dies, retires, resigns, is expelled, is dissolved, experiences bankruptcy, or upon the occurrence of any other event which terminates the continued membership of member in the Company, the remaining members may, by unanimous written agreement, continue the business of the Company.

7. Management of the Company. The management of the limited liability company is reserved to the member. The following person will initially be the day-to-day managing member:

- | | |
|------------------------------------|------------------------------------|
| 1. Sadia Chocron 50% | 2. Jose Vaisberg 50% |
| 1651 N.E. 196 th Street | 1651 N.E. 196 th Street |
| N. Miami Beach, FL 33160 | N. Miami Beach, FL 33160 |

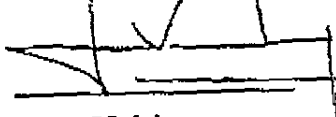
8. Regulations. The members shall have the power to adopt, alter, amend, or repeal regulations of the Company containing provisions for the regulation and management of the affairs of the Company.

9. Date of Existence of the Company. The existence of the Company shall commence on the date of filing the Articles of Organization by the Florida Department of State.

The undersigned executed these Articles of Organization on February 28, 2003.



Sadia Chocron



Jose Vaisberg
member

FILED
DEPT. OF STATE
TALLAHASSEE, FLORIDA

06 MAR 19 09 08:20

H030000079903

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the Provisions of Section 608.415, Florida Statutes, the undersigned Limited Liability Company submits the following statement in designation of the Registered Office/Registered Agent, in the State of Florida.

1. The name of the Limited Liability Company is:

ATLANTIC 405 LLC.

2. The names and address of the Registered Agents and offices is:

Sadia Chocron
1651 N.E. 196th Street.
N.Miami, FL. 33160

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.

Dated this 28th day of February 2003.



SADIA CHOCRON

H030000079903

FILED
MAR 13 2003
TALLAHASSEE, FLORIDA

03 MAR 13 2003 8:20