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Woodbridge Apts., LLC
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ARTICLES OF ORGANIZATION
OF
1 AB, WOODBRIDGE APTS., LLC

THE UNDERSIGNED, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a Limited Liability Company under the laws of the State of Florida, do hereby set forth the following:

NAME

The name of the Limited Liability Company is:

1 AB, WOODBRIDGE APTS., LLC

MAILING ADDRESS AND STREET ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is 10557 N. W. 53rd Street, Sunrise, Florida 33351.

REGISTERED AGENT

The name and address of the initial Registered Agent in Florida for the Limited Liability Company is **LEONARD EDELMAN**, 10557 N. W. 53rd Street, Sunrise, Florida 33351.

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MANAGEMENT

The Limited Liability Company is to be managed by one (1) manager
name and address of the manager is **LEONARD EDELMAN**, 10557 N. W.
et, Sunrise, Florida 33351.

ecuted this 31 day of March, 2003.

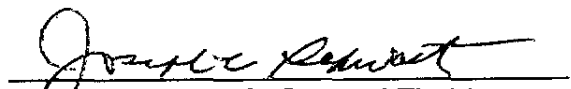


LEONARD EDELMAN (SEAL)

OF FLORIDA)
) SS
(OF BROWARD)

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he foregoing instrument was acknowledged before me this 31 day of
003 by **Leonard Edelman**, Managing Member of **1 AB, Woodbridge Apts.**,
Florida limited liability company to be formed, ☒ who is personally known to
who has produced _____ as identification.

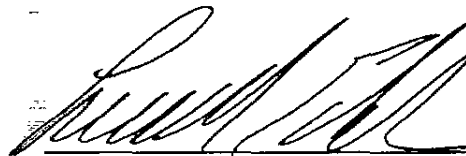


NOTARY PUBLIC, State of Florida

ACCEPTANCE BY REGISTERED AGENT

HAVING been appointed the Registered Agent of 1 AB, WOODBRIDGE
LLC, the undersigned accepts such appointment and agrees to act in such
and accepts the obligations contained in Section 608.415 of the Florida

EXECUTED this 31 day of March 2003.



LEONARD EDELMAN
Registered Agent

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