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# Florida Department of State

Division of Corporations Public Access System

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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

## BISCAYNE VENTURE DEVELOPMENT LLC

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



# FOR



### BISCAYNE VENTURE DEVELOPMENT LLC

#### ARTICLE L - NAME:

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

#### BISCAYNE VENTURE DEVELOPMENT LLC

## ARTICLE II. - ADDRESS

The mailing address and street address of the principal office of the Company is: c/o Samuel & Co., LLC, 444 Brickell Avenue, Suite 650, Miami, Florida 33131.

## 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 its managers. The names and addresses of the initial managers of the Company are:

> Dan Pfeffer c/o Midtown Equities, LLC 417 Fifth Avenue, 9th Floor New York New York 10015

And

Michael Samuel c/o Samuel & Co., LLC 444 Brickell Avenue. Suite 650 Mismi, Florida 33131

(In accordance with section 508.408(3), Florida Statutes, the execution of this affidevit constitutes an affirmation moder the penalties of penjury that the facts stated herein are muc.)

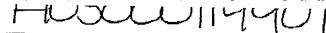
ova Member Representative

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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: BISCAYNE VENTURE DEVELOPMENT LLC
- The name and the Florida street address of the registered agent are:

MICHAEL SAMUEL

444 Brickell Avenue, Suite 650
Florida street address (A.O. BOX NOT ACCEPTABLE)

Minni, Florida 13131 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 cartificate. 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.

CILATURE

DESTRUCTION OF 19

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