

L03000017129

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

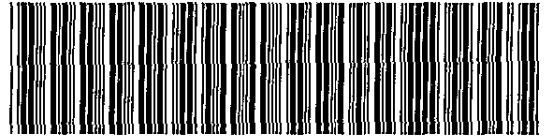
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



400018667024

RECEIVED  
03 MAY 13 PM 12:01  
DEPT. OF REVENUE  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

L03-17129  
al  
FILED  
03 MAY 13 PM 12:36  
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 090342 4305390

AUTHORIZATION : *Patricia Pizutto*

COST LIMIT : \$ 155.00

ORDER DATE : May 12, 2003

ORDER TIME : 10:35 AM

ORDER NO. : 090342-005

CUSTOMER NO: 4305390

CUSTOMER: Ms. Kimberly Calkin-mcEllen  
Cole Schotz Meisel Forman &  
Leonard  
P.o. Box 800  
25 Main Street  
Hackensack, NJ 07601

DOMESTIC FILING

NAME: JREALTY, LLC

EFFECTIVE DATE:

- ARTICLES OF INCORPORATION
- CERTIFICATE OF LIMITED PARTNERSHIP
- ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward - EXT. 1135

EXAMINER'S INITIALS: \_\_\_\_\_

STATE OF FLORIDA

03 MAY 13 PM 12:36

FILED

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

JREALTY, LLC

**ARTICLE II - Address:**

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

c/o Jeffrey Halpern, 747 Bloomfield Ave., West Caldwell, NJ 07006

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

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

Corporation Service Company  
Name

1201 Hays Street  
Florida street address (P.O. Box **NOT** acceptable)

Tallahassee FL 32301  
City, State, and Zip

FILED  
 03 MAY 13 PM 12:36  
 TALLAHASSEE, FLORIDA

*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 as provided for in Chapter 608, F.S.*

Corporation Service Company  
 BY *Suzette Coleman*  
 Registered Agent's Signature

(An additional article must be added if an effective date is requested)

*[Signature]*  
 Signature of a member or an authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Samuel Weiner, Esq., Authorized Representative  
 Typed or printed name of signee

**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)