

**L03000022036**

Florida Department of State  
Division of Corporations  
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To:

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

From:

Account Name : ANDREW G. KOLONDRAS, P.A.  
Account Number : I19990000139  
Phone : (954)346-0048  
Fax Number : (954)346-9201

**LIMITED LIABILITY COMPANY**

**East Hallandale 25, LLC**

Certificate of Status	0
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**ARTICLES OF ORGANIZATION  
FOR  
LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: **EAST HALLANDALE 25, LLC.**

**ARTICLE II - Address:**

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

**3525 Griffin Road, Fort Lauderdale, FL 33312**

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

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

**Eugene William Fullwood  
3525 Griffin Road  
Fort Lauderdale, FL 33312**

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 am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

**Registered Agent:**

  
**Eugene William Fullwood**

**Signature of Member:**

  
**Eugene William Fullwood - 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.

**Eugene William Fullwood**

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