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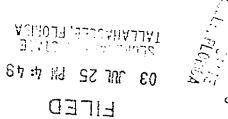
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DIVISION OF CONTURATION







ACCOUNT NO. : 072100000032	.4
REFERENCE: 183096 7265188	
AUTHORIZATION: Patricia Parits	44.8
COST LIMIT : \$ 130.00	
ORDER DATE : July 25, 2003	S TO
ORDER TIME : 2:18 PM	7 E &
ORDER NO. : 183096-005	
CUSTOMER NO: 7265188	
CUSTOMER: Mr. Steve Katz Krinzman, Huss & Lubetsky	03 JI
Suite 2025 1111 Brickell Avenue Miami, FL 33131	FILED IL 25 PI
DOMESTIC FILING	27 5
NAME: HSRC, LLC	A 9
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: Amanda Haddan - EXT. 1155 EXAMINER'S INITIALS:	<u> </u>

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

### ARTICLE I - Name:

The name of the Limited Liability Company is:

HSRC, LLC

### ARTICLE II - Address:

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

### Principal Office Address:

4520 S.W. 68th Court Circle Unit 21-5

Miami, Florida 33155

Mailing Address:

4520 S.W. 68th Court Circle

<u>Unit 21-5</u>

Miami, Florida 33155

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

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

Krinzman, Huss & Lubetsky

Name

1111 Brickell Avenue, 29th Floor Florida street address (P.O. Box NOT acceptable)

Miami

er 33155

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 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.

Registered Agent's Signature

(CONTINUED)

# ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:		
MGR	Richard Abramson 1455 Ocean Drive, Apt. #1610; Miami Beach, FL 33139	2 ≦	刊
MCRM	Sherry Abramson 1455 Ocean Drive, Apt. #1610 Miami, Beach, Florida 33139	1 25 PH 4: 49	日日
(Use attachment if necessary)			

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Signature of a member or 2n 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.)

Sherry Abramson

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)