

(Re	equestor's Name)			
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PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer.				







BA





ACCOUNT NO. : 07210000032

REFERENCE: 523410

AUTHORIZATION :

COST LIMIT : \$ 155.00

ORDER DATE: March 25, 2004

ORDER TIME : 11:52 AM

ORDER NO. : 523410-005

CUSTOMER NO: 4729553

CUSTOMER: Jordan D. Yuelys, Esq Jordan D. Yuelys Esq

Suite 304

505 Main Street

Hackensack, NJ 076010000

DOMESTIC FILING

NAME:

1547 PERIWINKLE WAY, LLC

EFFECTIVE DATE:

XX	CERTIFICATE OF LIMITED PARTNERSHIP ARTICLES OF ORGANIZATION			
PLEASE	RETURN THE FOLLOWING AS PROOF OF FILING:			
XX	CERTIFIED COPY PLAIN STAMPED COPY CERTIFICATE OF GOOD STANDING			

CONTACT PERSON: Sara Lea - EXT. 2914

ARTICLES OF INCORPORATION

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	NIEV A TIEMNI			
ARTICLES OF ORGATION FOR	NIZATION LITY COMPANY ARCHARSSEE, F. S. J. S.			
FLORIDA LIMITED LIABILITY COMPANY				
	是			
ARTICLE I - Name:	10 m			
The name of the Limited Liability Company is:	で、発見を			
1547 Periwinkle Way, LLC	The sign of			
	ORITE S			
ARTICLE II - Address: The mailing address and street address of the principal	office of the Limited Liability Company is:			
The little address and secon address of ale principal	onition of the Daniel District Company is			
Principal Office Address:	Mailing Address:			
1547 Periwinkle Way	39 West Front Street			
Sanibel, FL 33957	Keyport, NJ 07735			
ARTICLE III - Registered Agent, Registered Office The name and the Florida street address of the registered				
Corporation Service Company				
Name				
1201 Hays Street				
Florida street address (P.O. Box NOT acceptable)				
Tallahassee FI City, State, and Zip	ORIDA 32301			
ماسي وسيدي المستداد والمستداد والمست				

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, Florida Statutes..

> Corporation Service Company Registered Agent's Signature

> > Page 1 of 2 (CONTINUED)

Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member 40 McCampbell Road Mark Sobel MGRM Holmdel, NJ 07733 (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED 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.)

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

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

Page 2 of 2

By: Ernest A. Curtin Jr. 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)