

W04000031997

Florida Department of State
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DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

Island Pointe 6N LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
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W04-31997

Electronic Filing Menu

Corporate Filing

Public Access Help

OK

ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **ISLAND POINT 6N LLC**

ARTICLE II - Address

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

Principal Office Address:

Mailing Address:

5220 NW 72 Avenue, Bay 2

5220 NW 72 Avenue, Bay 2

Miami, FL 33166

Miami, FL 33166

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

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

Barry R. Cohen

Name

1021 Ives Dairy Road, Suite 111

(P.O. Box or Mail Drop Box **NOT** Acceptable)

Miami, FL 33179

(City / State / Zip)

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MAY 11 2011
TALLAHASSEE FLORIDA

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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 - Barry R. Cohen

