cripts/etilcovr.exe Division of Corp.

Florida Department of State

Division of Corporations **Public Access System**

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H04000099758 3)))

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number

: (850)205-0383

From:

: EMPIRE CORPORATE KIT COMPANY Account Name

Account Number 072450003255 Phone

(305) 634-3694 Fax Number (305) 633-9696

LIMITED LIABILITY COMPANY

universal storage 27th avenue, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

Electronic Filing Manus

Composite Filing

Public Access Holp

1 of 1

5/6/04 11:30 AM

P.01703





ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:	Ot SEC
The name of the Limited Liability Company is:	
UNIVERSAL STORAGE 27TH AVENUE, LLC	AHAN
ARTICLE II - Address: The mailing address and street address of the prince	ripal office of the Limited Liability Company is
Principal Office Address:	Mailing Address: RE 55
1021 Twes Dairy Road	1021 Ives Dairy Road
Suite 111	Suite III
Miami, FI, 33179	Miami. FT. 33179
ARTICLE III - Registered Agent, Registered O The name and the Florida street address of the regi	
SANFORD N. REINHARD Name	
2875 N.E. 191st Street. Florida street address (P.O. B	
Aventura,	FLORIDA 33180
City, State, and	Zip
hapm momend as registered agent and to general coming	a administrative the above example limited it abilia.

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..

Registered Agent's Signature

Page 1 of Z (CONTINUED)

WHX-12-5004 15:01

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:
MGRM	UNIVERSAL STORAGE MANAGEMENT, FIG. 2 TO 1021 Ives Dairy Boad, #111, Missil PE 33179
(Use attachment if necessary)	

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

REQUIRED SIGNATURES

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.)

SANFORD N. REINHARD

Typed or printed name of signee

Filing Fees: 5108.00 Filing Fee for Articles of Organization 5 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

5 5.00 Certificate of Status (Optional)

Page 2 of 2