## L04000036407

| <b>19</b> -             | anna da Nama      |             |
|-------------------------|-------------------|-------------|
| 3H)                     | equestor's Name)  | •           |
| (Ad                     | dress)            |             |
| (Ad                     | dress)            | <del></del> |
| (Cit                    | y/State/Zip/Phone | • #)        |
| PICK-UP                 | ☐ WAIT            | MAIL        |
| (Bu                     | siness Entity Nan | ne)         |
| (Do                     | cument Number)    |             |
| ertified Copies         | _ Certificates    | of Status   |
| Special Instructions to | Filing Officer:   |             |
|                         |                   |             |
|                         |                   |             |
|                         |                   |             |
|                         |                   |             |
|                         |                   |             |

Office Use Only



700035785007

05/19/04--01015--008 \*\*155.00

FILED

04 MAY 13 PH 2: 47

SECRETARY STATE

TALLARY SEE: FLORIDA







UCC FILING & SEARCH SERVICES, INC. 526 East Park Avenue Tallahassee, Florida 32301 (850) 681-6528

HOLD
FOR PICKUP BY
UCC SERVICES
OFFICE USE ONLY

May 13, 2004

## CORPORATION NAME (S) AND DOCUMENT NUMBER (S)

| J |  | liver Blvd., LLC   |   |             |
|---|--|--------------------|---|-------------|
|   |  | <u> </u>           |   | SSE         |
|   | Filing Evidence  □ Plain/Confirmation Copy   |                    | Type of Docum  ☐ Certificate of Sta                                   |             |
|   | ⊠ Certified Copy                             |                    | ☐ Certificate of Go   | od Standing |
|   |  |                    | ☐ Articles Only   |             |
|   | Retrieval Request  Photocopy  Certified Copy |                    | ☐ All Charter Docu<br>Articles & Amer<br>☐ Fictitious Name<br>☐ Other | ndments     |
|   | NEW FILINGS                                  | AMENDMENTS         |   |             |
|   | Profit                                       | Amendment          |   |             |
|   | Non Profit                                   | Resignation of RA  | Officer/Director  |             |
| X | Limited Liability                            | Change of Register | red Agent   |             |
|   | Domestication                                | Dissolution/Withda | rawal   |             |
|   | Other  | Merger             |   |             |
|   | OTHER FILINGS                                | REGISTRATION       | QUALIFICATION   |             |
|   | Annual Reports                               | Foreign            |   |             |
|   | Fictitious Name                              | Limited Liability  |   |             |
|   | Name Reservation                             | Reinstatement      |   |             |
|   | Reinstatement                                | Trademark          |   |             |
|   |  | Other              |   |             |

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| SECULATION SEC | 01-44 13 | 4   |      |
|----------------|----------|-----|------|
|                | FLORIDA  | 7.2 | . T. |

| Spanish River   | ISIVA, LLC                                     |
|---|--|
| RTICLE II - Address:<br>he mailing address and street address of the prin | ncipal office of the Limited Liability Company |
| rincipal Office Address:  | Mailing Address:                               |
| JoNeil Industries   | Jo Neil Industries                             |
| P.O. Dox 265  | P-0. Box 265                                   |
| Boca. Raton, Flg. 33429   | Boca Raton, Fla. 3                             |

Boca Ratch, FLORIDA 33432

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, Florida Statutes.

Florida street address (P.O. Box NOT acceptable)

Registered Agent's Signature

Page 1 of 2 (CONTINUED)

| Title: "MGR" = Manager "MGRM" = Managing Member | Name and Address:  |
|---|--|
| MGR   | Richard Siskund  |
| ٠   |  |
|   |  |
|   |  |
|   |  |
|   |  |
|   | ` <del>_</del>   |
|   |  |
| (Use attachment if necessary)                   |  |
|   |  |
| NOTE: An additional article must                | t be added if an effective date is requested.  |
| REQUIRED SIGNATURE:                             | 2  |
| ( aloch   | The state of the s |
| Signature of a member or a                      | an authorized representative of a member.  |
| of this document constitutes                    | 608.408(3), Florida Statutes, the execution an affurnation under the penalties of perjury  |
| that the facts stated herein ar                 | A Tries?   |

Filing Feesi
\$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)