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| PICK-UP WAIT MAIL                           |
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| Special Instructions to Filing Officer:     |
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## TRANSMITTAL LETTER

|                                       | gistration Set<br>vision of Corp |   |                                       |                               |
|---------------------------------------|----------------------------------|---|---------------------------------------|-------------------------------|
|                                       | •                                | •   |                                       |                               |
| SUBJECT:                              | Rayley LL                        | .c  |                                       |                               |
| 000000                                | `, <del></del>                   |   | d Liability Company)                  |                               |
|                                       |                                  |   | ;<br>}                                |                               |
| The enclose                           | d Articles of                    | Organization and fee(s) are s                 | ubmitted for filing.                  |                               |
| Please retur                          | n all correspo                   | ondence concerning this matte                 | er to the following:                  |                               |
|                                       | Brigiffe S                       | abbah-Dery                                    | ļ                                     |                               |
|                                       | 2ngillo Ci                       |   | Name of Person)                       | <del></del>                   |
|                                       | •                                | ,   | !                                     |                               |
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|                                       |                                  | (   | Firm/Company)                         |                               |
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|                                       | Fair La                          | awn, NJ, 07410                                | . ,                                   |                               |
|                                       |                                  | (City   | /State and Zip Code)                  | <u> </u>                      |
|                                       | ÷                                |   |                                       |                               |
| For further i                         | information c                    | oncerning this matter, please                 | call:                                 |                               |
|                                       |                                  |   |                                       |                               |
| Brigitte Sa                           | hhah-Denr                        | •   | at ( 201 ) 791-2075                   |                               |
| Brigitte Sabbah-Dery (Name of Person) |                                  | at (201 ) 791-2073<br>(Area Code & Daytime Te | elephone Number)                      |                               |
|                                       | ;                                | •   |                                       | ,                             |
| Enclosed is                           | s a check for                    | r the following amount:                       | · · · · · · · · · · · · · · · · · · · | ·                             |
| \$125.00                              | Filing Fee                       | ☐ \$130.00 Filing Fee &                       | ☐ \$155.00 Filing Fee &               | ☐ \$160.00 Filing Fee,        |
| , <b>412010</b> 0                     |                                  | Certificate of Status                         | Certified Copy                        | Certificate of Status &       |
|                                       | ÷                                | •   | (additional copy is enclosed)         | Certified Copy                |
|                                       |                                  |   | -                                     | (additional copy is enclosed) |
|                                       | <u> </u>                         |   | Į                                     |                               |
| STREET ADDRESS:                       |                                  | MAILING A                                     | DDRESS:                               |                               |
|                                       | Registration Section             |   | Registration Section                  |                               |
| Division of Corporations              |                                  | Division of Corporations                      |                                       |                               |
|                                       |                                  | Gaines Street                                 | P.O. Box 632                          |                               |
| Tallahassee, Florida 32399            |                                  | Tallahassee, Florida 32314                    |                                       |                               |

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY **ARTICLE I - Name:** The name of the Limited Liability Company is: Rayley 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:** 208 N.University Drive 208 N.University Drive Pembroke pines, FI 33024 Pembroke pines, FI 33024 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: The name and the Florida street address of the registered agent are: Michael J Hababou Name 21300 San Simeon Way - # Q5 Florida street address (P.O. Box NOT acceptable) North Miami Beach, 33179

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

City, State, and Zip

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):
The name and address of each Manager or Managing Member is as follows:

| Title:<br>"MGR" = Manager<br>"MGRM" = Managing Membe       | ·              | Name and Address:   |  |
|--|----------------|---|--|
| Manager  |                | Brigitte Sabbah-Dery  |  |
| iviariagei   |                | 40-05 Knott Terrace   | <del></del>                                    |
|  |                | Fair Lawn, NJ, 07410  |  |
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| (Use attachment if necessary)  NOTE: An additional article | must be        | added if an effective d   | ate is requested.                              |
| REQUIRED SIGNATURE:  |                | ~   |  |
|  | Lah            |   | 77. (1   |
| Signature of a   | member or      | an authorized representa  | tive of a member.                              |
| (In accordance of this document that the facts             | nt constitute: | 608.408(3), Florida Statute<br>s an affirmation under the p<br>n are true.) | es, the execution<br>enalties of perjury       |
| Michael J Ha   | babou          |   |  |
|  |                | or printed name of signee   | <del>- 1</del>                                 |
|  | • •            | -   | ì  |
| <u>Filing Fees:</u>  |                |   | 1  |
| \$125.00 Filing Fee for Articles of Registered Agent       | of Organiza    | tion and Designation  | ,  |

\$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)