Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name

: GERALD WEINBERG, P.C.

Account Number : I20030000043

Phone

: (800)342-9856

Fax Number

: (800)354-3381

LIMITED LIABILITY COMPANY

AMERICAN BUSINESS SOUTH, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
AMERICAN BUSINESS SOUTH, LLC.	
ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company	y is:

Principal	Office	à ddrage:
T LINCINAL	OHIE	Vinces:

er. M	Martin	
3200	N. Military Trail	
	Paton PT. 33431	

Mailing Address:

c/o I Martin
3200 N. Military Trail
Boca Raton, FL 33431

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

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

Joel Katz_		
	Name	_
250 Bradley	Place	
Florida	street address (P.O. Box NOT accept	able)
Palm Beach	FL 33480	
Ci	ty, 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, Lhereby 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 Again's Signature

(CONTINUED)

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

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

Title: "MGR" = Manager "MGRM" = Managing Member	Name and Address:
• •	Joel Katz
MGRM	
	250 Bradley Place
	Palm Beach, FL 33480
MGRM	Alan Grad
	722 Cove Road
	Mamaroneck, NY 10548
MGRM	Harvey Stein
	19341 Lost Oaks Lane
•	Boca Raton, FL 33498
	•
(Use attachment if necessary)	
NOTE: An additional article m	ust be added if an effective date is requested.
REQUIRED SIGNATURE:	
Signature of a pro-	of an authorized representative of a member.
of this document co	n section 608.408(3), Florida Statutes, the execution matitutes an affirmation under the penalties of perjury ed herein are true.)
Joel I	
	Typed or printed name of signae

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

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