

W5000002178

Florida Department of State
Division of Corporations
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Electronic Filing Cover Sheet

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To:
Division of Corporations
Fax Number : (850) 205-0383

From:
Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

05 JAN -6 PM 2:53

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

big rock properties, llc

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

③

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Big Rock Properties, LLC

ARTICLE II - Address:

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

Principal Office Address:

2424 N.E. 22nd Street
Suite 200
Pompano Beach, FL 33062

Mailing Address:

2424 N.E. 22nd Street
Suite 200
Pompano Beach, FL 33062

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

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

Michael C. Klasfeld, P.A.

Name

2424 N.E. 22nd Street, Suite 100

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

Pompano Beach, FL 33062

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, F.S..


Registered Agent'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

MGRM

Name and Address:

Alan S. Klasfeld and Michael C. Klasfeld,
as CoTrustees of the Klasfeld Family
Trust Agreement dated November 18,
2004

2424 N.E. 22nd Street, Suite 200
Pompano Beach, FL 33062

(Use attachment if necessary)

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

REQUIRED SIGNATURE:



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.)

Michael C. Klasfeld, Esq.

Typed or printed name of signer

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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