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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name

: FAS-T CORP. AGENTS, INC.

Account Number : 071001002335 Phone

(305) 599-0839

Fax Number

: (305)716-0346

## LIMITED LIABILITY COMPANY

## ABELSON PROPERTIES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

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# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name

The name of the Limited Liability Company is ABELSON PROPERTIES, LLC

#### ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is 2017 S. Ocean Drive, Unit 409 W. Hallandale Beach, FL 33009

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

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

Leslie Abelson 2017 S. Ocean Drive Unit 409 W Hallandale Beach, FL 33009

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 prided for in Chapter 608, F.S.

Registered Agent's Signature

#### ARTICLE IV - Management

manager - managed company.	Z.
Xmi de la	SECR LLA
Leslie Abelson	TAN I
(In accordance with section 608.408(3),	(In accordance with section 608,408(3)).
Florida Statutes, the execution of this	Florida Statutes, the execution of this
document constitutes an affirmation under the	document constitutes an affirmation under the
penalties of perjury that the facts stated herein	penalties of perjury that the facts stated herein
are true.)	are true.)