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TRANSMITTAL LETTER

TO:

Registration Section

Division of Corporations		
SUBJECT: EAB investments, L.L.C.		
(Name of Limi	ited Liability Company)	
The enclosed Articles of Organization and fee(s) are	e submitted for filing.	
Please return all correspondence concerning this ma	atter to the following:	
Joshua D. Krut		
	(Name of Person)	
Phillips, Eisinger & Brown, P.A.		
	(Firm/Company)	
4000 Hollywood Blvd., Ste. 265-Soutl	h	
	(Address)	
∺ollywood, Florida 33021	·	
(Ci	ity/State and Zip Code)	
For further information concerning this matter, please	se call:	
Joshua D. Krut	at (954) 894-3038	
(Name of Person)	(Area Code & Daytime To	elephone Number)
Enclosed is a check for the following amount:		ZUO SE TALL
□ \$125.00 Filing Fee Solution		7 \$160.00 Filing Fee, Certificate of Status & Certified Copy
		(additional topy is enclosed)
STREET ADDRESS: Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399	MAILING A Registration S Division of Co P.O. Box 632 Tallahassee, F	Section STATE Proporations STATE Proporation STATE Pro

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Company	is:
EAB Investments, L.L.C.	
ARTICLE II - Address:	
The mailing address and street address of the	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1170 NW 11th Street	1170 NW 11th Street
Miami, Florida 33136	Miami, Florida 33136
ADTICLE III Desistand Agent Desistan	and Office P. Dominton J. Amenda Simonton
ARTICLE III - Registered Agent, Register	red Office, & Registered Agent's Signature:
The name and the Florida street address of th	e registered agent are:
Gary L. Brown, Esq., Phillips	s, Eisinger & Brown, P.A.
Nar	· · · · · · · · · · · · · · · · · · ·
4000 Hollywood Blvd., Ste.	265-South TAS III
	address (P.O. Box NOT acceptable)
Hollywood, Florida 33021	265-South address (P.O. Box NOT acceptable) ART
City, Stat	e, and Zip
liability company at the place designated i registered agent and agree to act in this capa statutes relating to the proper gpd complete	to accept service of process for the above stated limited in this certificate, I hereby accept the appointment as city. I further agree to comply with the provisions of all performance of my duties, and I am familiar with and egistered agent as provided for in Chapter 608, F.S
Registered Ager	nt's Signature

(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:

<u>fitle:</u> MGR" = Manager MGRM" = Managing Member	Name and Address:				
MGR	Sam Burstyn				
	1170 NW 11th Street				
	Miami, Florida 33136				
					
					
	e added if an effective date is requested.				
REQUIRED SIGNATURE: Signature of a member of	or an authorized representative of a member.				
(In accordance with section of this document constitute that the facts stated here	on 608.408(3), Florida Statutes, the execution es an affirmation under the penalties of perjury ein are true.)				
Gary L. Brown, Esq.	SECR	71	Phoen =		
Турес	or printed name of signee			7	.(-4
Filing Fees:					
	18 SSEE	m			
\$125.00 Filing Fee for Articles of Organiz of Registered Agent \$ 30.00 Certified Copy (Optional)	18 F SSEE,	G			