

Mar. 11. 2005 2:13 PM

No. 8785 PaP. 1 of 1

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Florida Department of State
Division of Corporations
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MJH

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

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DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

MSR REALTY LLC

Certificate of Status	0
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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:

MSR REALTY LLC

ARTICLE II - Address:

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

Principal Office Address:

812 Indian Lake Dr
Indian Lake Estates
Florida 33855

Mailing Address:

c/o Richard Carrus
15 Delaware Ave
Jericho, NY 11753

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

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

SIMON MILBERG
Name

812 Indian Lake Dr
Florida street address (P.O. Box NOT acceptable)

INDIAN LAKE ESTATES FL 33855
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.

Simon M. Milberg
Registered Agent's Signature

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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:

MGRM

SIMON MILBERG
P.O. Box 7793
INDIAN LAKE ESTATES, FL 33854

MGRM

RICHARD CARRAS
15 DELAWARE AVE
JERICHO NY 11753


MGRM

MIKE KRAFT
P.O. Box 8314
LAKE SHORE, FL 33854

(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.)

SIMON MILBERG
Typed or printed name of signer

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