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(Re	equestor's Name)
(Ac	ddress)
(Ac	ddress)
(Ci	ty/State/Zip/Phone #)
PICK-UP	WAIT MAIL
(Bu	usiness Entity Name)
(Do	ocument Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:

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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

4040 Sher	idan, UC	,	SECHLARSSEE, FLORIDA	
			Art of Inc. File LTD Partnership File Foreign Corp. File L.C. File Fictitious Name File	
			Trade/Service Mark Merger File Art. of Amend. File RA Resignation Dissolution / Withdrawal	
			Annual Report / Reinstatement Cert. Copy Photo Copy Certificate of Good Standing Certificate of Status	_
			Certificate of Fictitious Name Corp Record Search Officer Search Fictitious Search	
Requested by: Name) 3/15 Date Ti	me	Fictitious Owner Search	
Wolk In	Will Pick I In		Courier	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMP

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The name of the Limited Liability Company is:

4040 Sheridan, LLC

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

c/o Engelberg & Milgrim, P. A.	c/o Engelberg & Milgrim, P.A.
3230 Stirling Road, Suite 1	3230 Stirling Road, Suite 1
Hollywood, Florida 33021	Hollywood, Florida 33021

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

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

Morris Engelberg, Esquire	
Name	
3230 Stirling Road, Suite 1	_
Florida street address (P.O. Box NOT acc	eptable)
Hollywood, Florida 33021 FL	_
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)

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: Name and Address: Title: "MGR" = Manager "MGRM" = Managing Member Morris Engelberg, Esquire MMGRM 3230 Stirling Road, Suite 1 Hollywood, Florida 33021 (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.) Morris Engelberg, Esquire Typed or printed name of signee

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)