

From:

Division of Corporations

03/30/2005 12:15 #063 P.001/003

Page 1 of 1

**L05000031216**

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H05000077252 3)))

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

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

From:

Account Name : NATIONAL CORPORATE RESEARCH, LTD.  
Account Number : I20000000088  
Phone : (800) 221-0102  
Fax Number : (212) 564-6083

RECEIVED

05 MAR 30 PM 12:16

DIVISION OF CORPORATION

**LIMITED LIABILITY COMPANY**

**PRIME PB VESUVIO LLC**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing

Public Access Help

J. BRYAN MAR 31 2005

From:

03/30/2005 12:25 #063 P.002/003

(H05000077252 3)

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

PRIME PB VESUVIO LLC

**ARTICLE II - Address:**

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

**Principal Office Address:**

1340 South Ocean Blvd., Apt. 1805

Pompano Beach, FL 33062

**Mailing Address:**

c/o Allen Kahan

220-58 Hartland Avenue

Queens Village, NY 11427

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

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

Allen Kahan

Name

1340 South Ocean Blvd. Apt. 1805

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)

Page 1 of 2

(H05000077252 3)

FILED  
2005 MAR 30 AM 10:24  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

From:

03/30/2005 12:26 #063 P.003/003

(H05000077252 3)

**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

Allen Kahan

220-66 Hartland Avenue

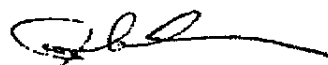
Queens Village, NY 11427

FILED  
2005 MAR 30 AM 10:24  
DIVISION OF CORPORATIONS  
TALLAHASSEE, FLORIDA

(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.)

Allen Kahan

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)

(H05000077252 3)