

L05000042302

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

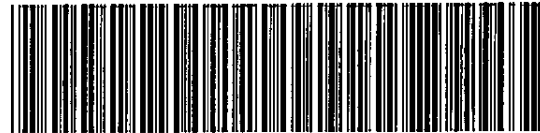
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05 APR 29 PM 12:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CORPORATION SERVICE COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 343069 4300856

AUTHORIZATION :

Patricia Pajot

COST LIMIT : \$ 125.00

FILED
05 APR 29 PM 12:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ORDER DATE : April 28, 2005

ORDER TIME : 9:37 AM

ORDER NO. : 343069-005

CUSTOMER NO: 4300856

CUSTOMER: Sergio Tuero, Esq
Goldberg Weprin & Ustin

22nd Floor
1501 Broadway
New York, NY 10036

DOMESTIC FILING

NAME: PLANTATION SHOPPES FLA LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
CERTIFICATE OF LIMITED PARTNERSHIP
XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
XX PLAIN STAMPED COPY
CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Amanda Haddan - EXT. 2955

EXAMINER'S INITIALS: _____

04/28/05 16:38 FAX 212 730 4518

GOLDBERG WEPRIN & USTIN

0002/003

04/28/2005 15:19 FAX 2124592896
04/28/05 16:12 FAX 212 730 4518

MANDELL AND MANDELL + GWU
GOLDBERG WEPRIN & USTIN

APR. 28. 2005 3:39PM

NO. 2431
FILED
APR 29 PM 12:22
CLERK OF DISTRICT COURT
STATE OF FLORIDA

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

PLANTATION SHOPPES FLA LLC

ARTICLE II - Address:

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

Principal Office Address:

11555 Heron Boulevard

Suite 200

Coral Springs, FL 33076

Mailing Address:

11555 Heron Boulevard

Suite 200

Coral Springs, FL 33076

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

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

Tulepan Management LLC

Name

11555 Heron Boulevard, Ste. 200

Florida street address (P.O. Box **NOT** acceptable)

Coral Springs FLORIDA 33076

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, Florida Statutes..

Tulepan Management LLC

By: Graig Tulepan, MANAGER
Registered Agent's Signature

04/28/05 16:38 FAX 212 730 4518
04/29/2005 15:19 FAX 2124592896
04/29/05 15:12 FAX 212 730 4518

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APR. 28. 2005 3:39PM

NO. 2431 P. 3/3

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

Bob Roberts

c/o Tulip Management LLC

11558 Heron Blvd., Ste. 200

Coral Springs, FL 33076

(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.)

By: Bob Roberts

Typed or printed name of signer

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)