

Aug. 9. 2005 1:23PM  
DIVISION OF CORPORATIONS

No. 0001 Page 1 of 1

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Florida Department of State  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

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

From: Account Name : GERALD WEINBERG, P.C.  
Account Number : 120030000043  
Phone : (800)342-9856  
Fax Number : (800)354-3381

**LIMITED LIABILITY COMPANY**

**1241 SURF ROAD LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$125.00

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Aug. 9. 2005 1:23PM

No. 8061 P. 2

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(H05000190299 3)

2005 AUG -9 A 10:02

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

1241 SURF ROAD 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:

6500 JERICHO TPK  
COMMACK, N.Y. 11725

6500 JERICHO TPK  
COMMACK, N.Y. 11725

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

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

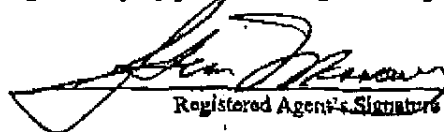
STEVE MASSANA  
Name

11971 GLENMORE DRIVE

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

CORAL SPRINGS FL 33071  
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

(H05000190299 3)

(H05000190299 3)

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2005 AUG -9 A 10:1

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**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:**

ANDREW PACE

361 UNION BLVD  
WEST ESSEX NY 11791

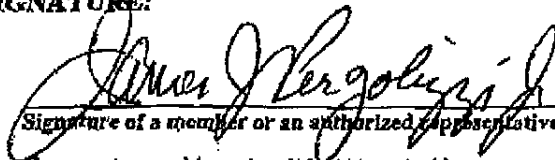
JAMES PERGOLIZZI

6500 JERICHO TPK  
COMMACK, NY 11735

(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.)

JAMES J. PERGOLIZZI JR  
Typed or printed name of signer