## L05000091831

(Requestor's Name)			
(Address)			
(Address)			
, ,			
(City/State/Zip/Phone #)			
(Only) Catalog 2, p. 1. Hono a)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			

Office Use Only



600058995256

n9/12/05--01017--016 \*\*125.00

05 SEP 12 PM 3: 09

## TRANSMITTAL LETTER

	(Name of Person) (Area Code & Daytime Telephone Number)
Cary R.	. Latimer at (312 ) 422-8000
ror turule	a miormanon concerning uns maner, prease carr.
For furthe	er information concerning this matter, please call:
	(City/State and Zip Code)
	Chicago, Illinois 60603
	(Address)
55	5 East Monroe Street, Suite 1100
	(Firm/Company)
	Latimer LeVay Jurasek LLC
	(Name of Person)
	Cary R. Latimer
	Please return all correspondence concerning this matter to the following:
The enclo	osed Articles of Organization and fee(s) are submitted for filing.
	(Ivaline of Elimited Elability Company)
SUBJEC	(Name of Limited Liability Company)
CUDIEC	T: 1607 SE 1st Street LLC
	Registration Section Division of Corporations
	Registration Section Division of Corporations

STREET ADDRESS: Registration Section
Division of Corporations
409 E. Gaines Street

Tallahassee, Florida 32399

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:	
The name of the Limited Liability Comp	pany is:
1607 SE 1st Street LLC	
1, 2, 1	
ARTICLE II - Address:	
The mailing address and street address of	of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3530 North Halsted	3530 North Halsted
Chicago, Illinois 60657	Chicago, Illinois 60657
ARTICLE III - Registered Agent, Reg	gistered Office, & Registered Agent's Signature:
The name and the Florida street address	
	SET
David Seif	
	Name 5
	-P
	Drive, Suite 205
Florida street add	Drive, Suite 205  dress (P.O. Box NOT acceptable)
Fort Lauderdale	FLORIDA 33304
City	v 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..

By: Registered Agent's Signature

Page 1 of 2 (CONTINUED)

## ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

MGR	Jacob Gruver
	3530 North Halsted
	Chicago, Illinois 60657
MGR	Dean Miller
	3530 North Halsted
	Chicago, Illinois 60657

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: CARY R. LATIMER, Authorized Representative

Typed or printed name of signee

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)

05 SEP 12 PM 3: 09