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# Florida Department of State

Division of Corporations **Public Access System** 

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To:

Division of Corporations

Fax Number

: (850)205-0383

Account Name

: FILINGS, INC.

Account Number: 072720000101 Phone

: (850)385-6735

Fax Number

: (954)641-4192

## LIMITED LIABILITY COMPANY

## MORNINGSIDE PARTNERS LLC

Certificate of Status	0
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## ARTICLES OF ORGANIZATION

OF

## MORNINGSIDE PARTNERS LLC

The undersigned, under the provisions of Chapter 608 of the Florida Stannes (the "Act"), for the purpose of forming a limited liability company under the laws of the State of Florida, sets forth the following:

#### ARTICLEI

#### NAME OF COMPANY

The name of this limited liability company shall be: Morningside Partners LLC (the "Company").

## ARTICLE II

## **ADDRESS**

The Company's mailing and street address is:

600 N.B. 50th Terrace Miami, FL 33137

## ARTICLE III

## NATURE OF BUSINESS

The general purpose for which this Company is organized is to engage in any lawful business ich limited Hability companies may be organized under the Act. for which limited liability companies may be organized under the Act.

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## ARTICLE IV

## DURATION

Unless earlier terminated under the Act or the Operating Agreement, the period of the Company's duration shall be perpetual.

## ARTICLE V

## INITIAL REGISTERED AGENT AND INITIAL REGISTERED OFFICE

The Company's initial Registered Agent and Registered Office in the State of Florida shall bc:

> ADELE I. STONE, ESQUIRE c/o Atkinson, Diner, Stone, Mankuta & Ploucha, P.A. One Pinancial Plaza 100 S.E. Third Avenue, Suite 1400 Fort Lauderdale, Florida 33394

#### ARTICLE VI

## MANAGEMENT OF THE COMPANY

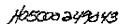
The Company is to be managed by its members in accordance with the terms of the Operating Agreement.

#### ARTICLE VII

## COMMENCEMENT DATE

Existence of the Company will commence upon the filing of these Articles,

THE UNDERSIGNED, the authorized representative of a member of the Company, for the purpose of forming a limited liability company to do business within the State of Florida, does make! and file these Articles of Organization, hereby declaring and certifying that the facts stated are true.



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Dated: October 2, 2005.

ADELE I. STONE

The undersigned hereby accepts the foregoing designation as initial Registered Agent, is

familiar with, accepts and agrees to comply with the provisions of law applicable to said designation.

ADELLI I. STONE

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SECRETARY OF STATE

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