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CEIVED	05 NDV 10 PM 1: 22	ISION OF CORPORATION	From:	Division of Corporations Fax Number : (850)205-0383 Account Name : EMPIRE CORPORATE KIT COMPANY Account Number : 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696	NOV 10 AM II: 11	
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# LIMITED LIABILITY COMPANY

# dldj duplex, llc

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### ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

DLDJ DUPLEX, LLC

(Must and with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "L.C,")

### **ARTICLE II - Address:**

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

Princingi Office Address:	Mailing Address:		
1821 Purdy Avenue	1821 Purdy Avenue		
Miami Beach, FL 33139	Miami Beach, NL 33139		
ARTICLE III - Registered Agent, Re (The Limited Linkitky Company cannot serve as its of humans onity with an active Florida registration.)			
The name and the Florida street address	of the registered agent are:		
Karl J. Schumer	, Esquire		
Karl J. Schmer 20801 Biscayne 1	Name , P.A. Houlevard, Suite #301		
Plorida	street address (P.O. Box NOT acceptable)		
Aventura	FL 33180-1422		
Chy	y, State, and Zip		
liability company at the place designa registered agent and agree to act in this a statutes relating to the proper and comp accept the obligations of my position	and to accept service of process for the above stated limited ated in this certificate, I hereby accept the appointment as capacity. I further agree to comply with the provisions of all plete performance of my duties, and I am familiar with and as registered agent as provided for in Chapter 608, F.S. ** Signature (REQUIRED)		
	INTINUED) Ige10 <sup>72</sup> #05000262007		

\* **,** 20.9 JATOT

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

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

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member

#### Name and Address:

NGR.	David Burstyn	
	1821 Purdy Avenue	
	Miami Beach, FL 33139	
MGR	Ryn Zelkin	
•	1821 Purdy Avenue	
	Miami Baach, FL 33139	
	and the second	

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_\_. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prices to or 90 days after the date of filing.)

REOUIRED SIGNATURE:						
Signature of a member of an authorized	representative of a member,					
(In accordance with section 608.408(3), Flo of this document constitutes an affirmation that the facts stated herein are true.)	the states, are excanned					
KARL J. SCHUMER, ESQUIRE						
Typed or printed name of signer						
Filing Fees: \$125.00 Filing Fee for Articles of Organization and Design of Registered Agent \$ 30.00 Certified Copy (Optional) \$ 5.00 Certificate of Status (Optional)	ation					
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