## L05000117267

(Re	questor's Name)			
(Ad	dress)			
(Ad	dress)			
(Cit	y/State/Zip/Phone	#)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nam	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to	Filing Officer:			

Office Use Only



300061815533

OS DEC -9 AH IO: 02
SECRETARY OF STATE

DS DEC -9 AM 8: 53



THE CLUSTER COMINE.
ACCOUNT NO. : 072100000032
REFERENCE: 746622 7496317
AUTHORIZATION: Devise West
COST LIMIT: \$ 155.00
ORDER DATE: December 8, 2005
ORDER TIME: 5:32 PM
ORDER NO. : 746622-005
CUSTOMER NO: 7496317
-
DOMESTIC FILING
NAME: 3737 INVESTMENTS LLC
EFFECTIVE DATE:
XX ARTICLES OF ORGANIZATION
PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:
XX CERTIFIED COPY
CONTACT PERSON: Denise Mick - EXT. 2950
EXAMINER'S INITIALS:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY STORY OF THE PARTY ARTICLE I - Name: The name of the Limited Liability Company is: 3737 Investments LLC (Must end with the words "Limited Liability Company, "Limited Company" or their abbreviation "LLC," or "LC." ARTICLE II - Address: The mailing address and street address of the principal office of the Limited Liability Company is: Principal Office Address: Mailing Address: 848 Brickell Avenue, Suite 800 848 Brickell Avenue, Suite 800 Miami, FL 33131 Miami, FL 33131 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent You must designate an individual or another business entity with an active Florida registration ) The name and the Florida street address of the registered agent are: David B. Schatz Name 848 Brickell Avenue, Suite 800 Florida street address (P.O Box NOT acceptable) Miami 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

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

(CONTINUED)
Page 1 of 2

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

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

-	<u> </u>		Name and Address:	
	"MGRM" = Managing Member			
MGRM			Anthony Moretti  1321 Biarritz Drive  Miami Beach, FL 33141	
_				
_				
_				
Ţ)	Use attachment if nec	essary)		
(If an effe		ie date must be spe	of filing:cific and cannot be more than five	
<u>R</u>	<u>EQUIRED</u> SIGNAT	TURE:		
	(In acco	1 //	sutherized representative of a member, 408(3), Florida Statutes, the execution affirmation under the penalties of perjury rue.)	

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

By: David B. Schatz

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signes