Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number

: (850)205-0383

From:

Account Name

: EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

: (305) 634-3694

Fax Number

: (305)633-9696

LIMITED LIABILITY COMPANY

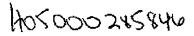
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Electropic Filing, Menu.

Public Access Help

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:		
The name of the Limited Liability (Company is:	
Harrison Street Property Holdi		
(Must end with the words "Limited Liability Co	ompany, "Lunited Company" or their abbreviation "LLC,"	or "L.C.,")
ARTICLE II - Address: The mailing address and street addr	ess of the principal office of the Limited Lia	bility Company is:
Principal Office Address:	Mailing Address:	
718 Diplomat Parkway	718 Diplomat Parkway	
Hallandale, FL 33009	Hallandale, FL 33009	
The name and the Florida street add	ress of the registered agent are:	
Ramov Weicki	ė.	₹s 6
Barney Weinkl	8 Name	05 DEC SECRE TALLAH
718 Diplomat	Name Parkway	05 DEC 15 SECRETAL TALLAHASS
718 Diplomat	Name	SSE 5
718 Diplomat	Name Parkway	IS AH
718 Diplomat	Name Parkway rida street address (P.O. Box <u>NOT</u> acceptable)	15 AH 9:
718 Diplomat Pio Hallandale Having been named as registered as liability company at the place des registered agent and agree to act in the second se	Name Parkway cida street address (P.O. Box NOT acceptable) FL 33009	SSEE. FLORIDE II Miled appointment as he provisions of all

Regimerod Agent's Signature (REQUINED)

(CONTINUED)
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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:
MGRM	Barney Weinkle 718 Diplomat Perkway Hallandale, FL 33009
MGRM	Keith Levine 718 Diplomat Parkway Hallandale, FL 33009
(Use attachment if necessary)	
ARTICLE V: Effective date, if other than the d (If an effective date is listed, the date must be to or 90 days after the date of filing.)	ate of filing: (OPTIONAL) specific and cannot be more than five business days prior .
REQUIRED SIGNATURE:	WW E

Signature of a member of an authorized representative of a member.

(in accordance with section 608,408(1), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Barney Weinkle

Typed or printed name of signee

Piline Fees:

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

5 30.00 Certified Copy (Optional) S 5.00 Certificate of Status (Optional)

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