

L0600000 1468

Division of Corporations

Jan 17 2006 10:43

P. 01

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Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 205-0383

From:

Account Name : BLUMBERG/EXCELSIOR CORPORATE SERVICES, INC.
Account Number : 075350000353
Phone : (212) 431-5000
Fax Number : (212) 431-1441

RECEIVED
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DIVISION OF CORPORATION

FLORIDA/FOREIGN LIMITED LIABILITY CO.

THOUSAND HILLS LLC

Certificate of Status	0
Certified Copy	0
Page Count	02-3
Estimated Charge	\$125.00

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TALLAHASSEE, FLORIDA

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New York, NY 10013	

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1/17/2006

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

THOUSAND HILLS LLC

ARTICLE II - Address:

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

Principal Office Address:

450 UNIT 201 ROBINHOOD CIRCLE
NAPLES, FL 34104

Mailing Address:

675 BROADWAY
MASSAPEQUA, NY 11768

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

VINCENT DELETTO

Name

450 UNIT 201 ROBINHOOD CIRCLE

Florida street address (P.O. Box NOT acceptable)

NAPLES, FL 34104

FL

City, 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, F.S.

X 
Registered Agent's Signature

2006 JAN 17 10:59 AM
STATE OF FLORIDA
TALLAHASSEE

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

VINCENT DELETTO

450 UNIT 201 ROBINHOOD CIRCLE

MASSAPEQUA, NY 11758

(Use attachment if necessary)

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 603.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Justin T. Reed, Organizer

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

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Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

Justin T. Reed
BlumbergExcelsior Corporate Services, Inc.
62 White Street
New York, NY 10013