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|   | SECRETARY O | F STATE<br>FORIDA |
| (Requestor's Name)                      |             |                   |
| (Address)                               |             |                   |
| (Address)                               |             |                   |
| (City/State/Zip/Phone                   | #)          |                   |
| PICK-UP WAIT                            | MAIL        |                   |
| (Business Entity Name                   | e)          |                   |
| (Document Number)                       |             |                   |
| Certified Copies Certificates           | of Status   |                   |
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### **COVER LETTER**

FILED

TO:

Registration Section Division of Corporations

2006 JAN 31 P 2: 14

SECRETARY OF STATE TALLAHASSEE, FLORIDA

(Name of Limited Liability Company)

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

WILLIAM E. SHOCKETT

(Name of Person)

WILLIAM E. SHOCKETT, P.A.

(Firm/Company)

25 WEST FLAGLER STREET - SUITE 711

(Address)

MIAMI, FLORIDA 33130

(City/State and Zip Code)

For further information concerning this matter, please call:

WILLIAM E. SHOCKETT

(Name of Person)

(Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

Certificate of Status

**✓** \$155.00 Filing Fee & Certified Copy

\$160.00 Filing Fee, Certificate of Status &

(additional copy is enclosed)

Certified Copy (additional copy is enclosed)

Mailing Address

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street/Courier Address

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF ORGANIZATION OF LEROY OF GREENWICH, LLC

FILED

#### ARTICLE I

2006 JAN 31 P 2: 14

NAME:

SECRETARY OF STATE TALLAHASSEE. FLORIDA

The name of the Limited Liability Company is LEROY OF GREENWICH, LLC.

#### **ARTICLE II**

#### ADDRESS:

The mailing address and street address of the principal office of the Limited Liability Company is 25 West Flagler Street, Suite 711, Miami, Florida 33130.

#### **ARTICLE III**

#### REGISTERED AGENT

The name and the Florida street address of the Registered Agent are:

WILLIAM E. SHOCKETT, ESQ. 25 West Flagler Street Suite 711 Miami, Florida 33130

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 futies, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S.

WILLIAM E/SHOCKETT

Registered Agent

#### **ARTICLE IV**

MANAGER OR MANAGING MEMBER:

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

Title:

Name and Address:

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**MGRM** 

LEONARD L. ABESS 25 West Flagler Street Miami, Florida 33130

SECRETARY OF STATE TALLAHASSEE, FLORID:

DATED this <u>24</u> day of January, 2006.

LEONARD L. ABESS Managing Member

(In accordance with Section 608.408(3) Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)