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## To:

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

## From:

Account Name : COHEN, NORRIS, SCHERER, WEINBERGER & WOLMER  
Account Number : I20020000140  
Phone : (561) 844-3600  
Fax Number : (561) 842-4104

Attn: Larissa K. Linedecker

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

## STRATEGY PLACE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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**ARTICLES OF ORGANIZATION OF  
STRATEGY PLACE, LLC**

The undersigned hereby forms and establishes a limited liability company pursuant to Chapter 608, Florida Statutes as follows:

**ARTICLE I**

The name of this limited liability company is STRATEGY PLACE, LLC.

**ARTICLE II**

This limited liability company shall become effective date of filing, unless sooner terminated as provided in the Operating Agreement executed or to be executed by the members..

**ARTICLE III**

The mailing address and street address of the principal place of business of this limited liability company is 4369 Northlake Blvd., Palm Beach Gardens, FL 33410. This limited liability company may, at its discretion, change the address of its principal place of business.

**ARTICLE IV**

The name and street address of the initial registered agent of this limited liability company is **GREGORY R. COHEN**, 712 U.S. Highway One, Ste 400, North Palm Beach, Florida 33408.

**ARTICLE V**

The management of this limited liability company shall be vested in a manager, and is therefore, a manager-managed company. The initial manager is **MICHAEL HORWITZ**, 4369 Northlake Blvd., Palm Beach Gardens, FL 33410.

**ARTICLE VI**

Additional members may be admitted to this limited liability company upon such terms and conditions as shall be established by the members as described in the Operating Agreement.

30th IN TESTIMONY WHEREOF, I have hereunto subscribed my name this  
day of March, 2006.

GREGORY R. COHEN, Authorized Agent of  
the Manager

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**CERTIFICATE DESIGNATING REGISTERED  
OFFICE FOR THE SERVICE OF PROCESS  
WITHIN THIS STATE, NAMING AGENT  
UPON WHOM PROCESS MAY BE SERVED**

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507,  
FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY  
SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED  
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

That **STRATEGY PLACE, LLC**, a Florida limited liability company, with its office  
at 4369 Northlake Blvd., Palm Beach Gardens, Florida 33410, has named GREGORY  
R. COHEN, at 712 U.S. Highway One, Ste 400, North Palm Beach, FL 33408, as its  
initial registered agent to accept service of process within this State.

**ACKNOWLEDGMENT:**

Having been named registered agent to accept service of process for the above  
stated limited liability company at the place designated in this Certificate, I hereby  
accept to act in such capacity and agree to comply with the applicable provisions of law.

By: \_\_\_\_\_

**GREGORY R. COHEN**  
Registered Agent

STATE OF FLORIDA )

COUNTY OF PALM BEACH )

The foregoing instrument was acknowledged before me this \_\_\_\_ day of March,  
2006 by GREGORY R. COHEN, who is personally known to me or who has produced  
N/A State Driver's License Number N/A as  
identification and who did ( ) or did not ☒ take an oath.

Executed this 21<sup>st</sup> day of March, 2006.

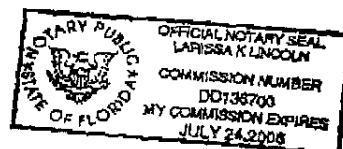
Signature of Notary

Printed Name: LARISSA K. LINCOLN

My Commission Expires:

My Commission Number:

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