	(Requestor's Name)	
	(Address)	
	(Address)	
***************************************	(City/State/Zip/Phone #)	
	PICK-UP WAIT	MAIL
	(Business Entity Name)	
	·	
	(Document Number)	
Certi	ified Copies Certificates of St	atus
	Filing Officer:	
S	pecial Instructions to Filing Officer:	
1	Office Use Only	•
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05/25/06--01043--006

B. Tedlock

COVER LETTER

TO: Registration Section Division of Corporations

SUBJECT: INTERNATIONAL PLAZA HOLDINGS, LLC

(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:

Anthony	T. Lepore, Es			
	(Name of Person)		
<u>Anthony</u>	T. Lepore, Esc			
	(Firm/Company)		
<u>P</u> .O. Bo	x 823662			
		(Address)		<u> </u>
South F	Florida, FL 330	082-366	2	
	(City	State and Zip Code)	
For further information	concerning this matter, please	call:		
				;
Anthony T. L	.epore	at (954	433-2	126
(Name	of Person)	· · · · · · · · · · · · · · · · · · ·	& Daytime To	elephone Number)
Enclosed is a check for	or the following amount:			
\$125.00 Filing Fee .	\$130.00 Filing Fee & Certificate of Status	\$155.00 Fi Certified Copy (additional copy i	′	\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address	Street/Co	urier Addres	s

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company	is:
INTERNATIONAL PLAZA HOLDI	
(Must end with the words "Limited Liability Company, "Lin	nited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of the	principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
3001 W. Hallandale Beach Blvd #300	3001 W. Hallandale Beach Blvd #300
Pembroke Park, FL 33009	Pembroke Park, FL 33009

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

Sam Jazayri

Name

3001 W. Hallandale Beach Blvd #300

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

Pembroke Park FL 33009
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..

Registered Agent's Signature (REQUIRED)

(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:

MGRM	95 WHSE, INC.
	3001 W. Hallandale Beach Blvd #300 .
	Pembroke Park, FL 33009
<u> </u>	
•	
(Use attachment if necessary)	
LE V: Effective date, if other than the	ne date of filing: (OPTIONA
fective date is listed, the date must	be specific and cannot be more than five business day

REQUIRED SIGNATURE:

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

Sam Jazayri, President, 95 WHSE, Inc. (MGRM)

Typed or printed name of signee

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)