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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : GERALD WEINBERG, P.C.

Account Number : 120030000043 Phone : (800)342-9856 : (800)354-3381 Fax Number

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6	PRIDA/FOREIGN LIMI 109 SUNRISI	ITED LIABILI E LLC	TY C
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	Page Count	03	
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

109 SUNRISE LLC	
	, "Limited Company" or their abbreviation "LLC," or "L.C.,")
ARTICLE II - Address: The mailing address and street address of	f the principal office of the Limited Liability Company is:
Principal Office Address:	Malling Address:
45 HARBOR PARK DRIVE	45 HARBOR PARK DRIVE LCC CENTERPORT, NY 11721 FE
CENTERPORT, NY 11721	CENTERPORT, NY 11721
,	istered Office, & Registered Agent's Signisture:
ARTICLE III - Registered Agent, Reg	
(The Limited Liability Company cannot serve as its over business entity with an active Florida registration.) The name and the Florida street address of	wn Registered Agent. You must designate an individual or migher
business entity with an active Florids registration.)	of the registered agent are:
The name and the Florida street address	wn Registered Agent. You must designate an individual or migher
The name and the Florida street address	of the registered agent are:
The name and the Florida street address of TIM HODGES 2640 E. OAKLAN	of the registered agent are:
The name and the Florida street address of TIM HODGES 2640 E. OAKLAN Florida s FORT LAUDERDAL	of the registered agent are: Name Name ID BOULEVARD Preset address (P.O. Box NOT acceptable)

Rogistered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

(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:

MGR	JOHN J. COZZOLI 45 HARBOR PARK DRIVE CENTERPORT, NY 11721
	SECRET ALLAH
	AHASSE
(Use attachment if necessary)	e.Flo
LEV: Effective date, if other than the	ne date of filing: (OPTIONAL) & be specific and cannot be more than five business days pri

REQUIRED SIGNATURE:

Signature of a manifestor on oblinating 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.)

John J. Cozzoli

Typed or printed name of signee