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SECRETARY OF STATE

N. C. JAN 3 - 2007

## **COVER LETTER**

Registration Section

TO:

Division of Corporations							
SUBJECT: PENTHOUSE PARTNERS, 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:							
Joseph C. Domiano	Name of Person)						
(	Name of Ferson)						
(Firm/Company)							
1370 Ontario Street, #60	0						
	(Address)						
Cleveland, OH 44113							
(City	/State and Zip Code)						
Pro-final control of the second of the secon							
For further information concerning this matter, please call:							
Joseph C. Domiano	at (216 ) 621-0070 (Area Code & Daytime Telephone Number)						
(Name of Person)	(Area Code & Daytime Telephone Number)						
Enclosed is a check for the following amount:							
\$125.00 Filing Fee \$\times \text{ Certificate of Status}\$	S155.00 Filing Fee & Certified Copy (additional copy is enclosed)  \$160.00 Filing Fee, Certificate of Status & 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 FOR FLORIDA LIMITED LIABILITY COMPANY

**ARTICLE I - Name:** 

The name of the Limited Liability Company	/ is:	
PENTHOUSE	PARTNERS, LLC	
(Must end with the words "Limited Liability Company, "I	imited Company" or their abbreviation "LLC	;" or "L.C.,")
ARTICLE II - Address:		
The mailing address and street address of th	e principal office of the Limited L	iability Company is
Principal Office Address:	Mailing Address:	
1131 Swallow Avenue, PH1	1370 Ontario Street, #600	
Marco Island, FL 34145	Cleveland, OH 44113	
ARTICLE III - Registered Agent, Registe (The Limited Liability Company cannot serve as its own F business entity with an active Florida registration.)	ered Office, & Registered Agent? Registered Agent. You must designate an indiv	s Signature:  Vidual Amother JAN
The name and the Florida street address of t	he registered agent are:	N-2 N-2 HASS
Joseph C. Domiano		<b>;-</b> -
Name		
1131 Swallow Aven	ue, PH1	- U Ph 12: 2i Of State E, floric
Florida stree	t address (P.O. Box NOT acceptable)	<b>≯</b> ™ +5

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)

City, State, and Zip

Marco Island, FL 34145

(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:

	Title:		Name and Address:			
	"MGR" = Manager "MGRM" = Manag					
	Manager	_	Joseph C. Domiano			
	<del></del>		1131 Swallow Avenue, PH1			
			Marco Island, FL 34145	<del></del>		
	Managing Member	<u>r</u>	Jeffrey H. Friedman			
			1141 Swallow, PH			
			Marco Island, FL 34145			
		-				
		-				
	(Use attachment if	necessary)				
ARTI	CLE V: Effective da	te, if other than the dat	e of filing: (	OPTIO	NAL)	)
(If an	effective date is listed 90 days after the date	d, the date must be sp	ecific and cannot be more than five bu	isiness o	lays	prior
		, or mingly				
	REQUIRED SIGN	NATURE:				
		2		SEC	07 JAN	
	X	Jan &	Jamesno	₩	Ā	
	Š	ignature of a member or	an authorized representative of a member.	AS	-2	
	(1	n accordance with section	608.408(3), Florida Statutes, the execution	SEE		ш
	0	I this document constitute that the facts stated herei	s an affirmation under the penalties of perjury n are true.)	世分	Ž N	O
	,	Joseph C. Domiano	,	OREI OR	PM 12: 2	
	-	Typed	or printed name of signee	×m	ŧ-	

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)