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To:

Division of Corporations.

Fax Number

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From:

Account Name : HUBCO

Account Number: 104662003400 Phone: (516)935-3940

Phone : (516) 935-3940 Fax Number : (516) 935-3088

FLORIDA/FOREIGN LIMITED LIABILITY CO.

FANRE 10840 Sheldon Rd, LLC

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SECRETASSES FLORING

| Certificate of Status | 1        |
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: FANRE 10840 Sheldon Rd, LLC

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is:

| Principal Office Addr   | ess:                                    | Mailing Address:      |  |          |
|-------------------------|---|-----------------------|--|----------|
| 453 Milton Road         |   | 453 Milton Road       | *  | ···      |
| Ryc, NY 10580           | <b>公司到上版中的第三人</b> 位                     | Ryc, NY 10580         | 把自我协同制制统40.  | <u> </u> |
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| ora not.                | 2 2 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 | discontinuition makes | 1.4'.  | 2        |
|                         | gistered Agent, Registered Offi         |                       | s Signature  | ROBERT F |
|                         | CORPDIRECT                              | AGENTS, INC.          | <u> </u>   | FARE     |
|                         |   | Name                  |  | 권위이      |

515 East Park Avenue

Tallahassee, FL 32301
(City / Stetc / Zip)

(P.O. Box or Mail Drop Box NOT Acceptable)

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 - Patricia Tadlock-Ass't Secretary

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| Title: "MGR" = Manager "MGRM" = Managing Member | Name and Address:  |
|---|--|
| MGRM  | Paul Sorbera- 453 Milton Road, Ryc, NY 10580   |
|   |  |
| *   |  |
| (Use attachment if necessary)                   | 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1   |
| REQUIRED SIGNATURE:                             | and the second of the second o |
|   | The second of th |
| Signature Signature                             | of a member or authorized representative of a member.  |
|   | nce with section 608.408(3), Florida Statutes, the execution of this constitutes an affirmation under the penalties of perjury that the facts in are true.)  |
|   | Paul Sorbera   |

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

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