Electronic Filing Cover Sheet

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To:

Division of Corporations

fax Number

: (850)205-0383

From:

Account Name : GERALD WEINBERG, P.C.

Account Number : 120030000043

: (800)342-9856

Phone Fax Number

: (800)354-3381

FLORIDA/FOREIGN LIMITED LIABILITY CO.

RECEIVED
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ECRETAIN OF STATE

450 LAKE WHITNEY REALTY L.L.C.

| Certificate of Status | 0 |
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| Certified Copy | 0 |
| Page Count | 03 |
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Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE I - Nan | ne: mited Liability Company is: | | |
|---------------------------|------------------------------------|--|---|
| The hame of the Er | mica Diability Company is. | | |
| 450 LAKE WHITNE | EY REALTY L.L.C. | | |
| (Must end with the words | | ed Company" or their abbreviation "LLC," or "L.C.,") | , . |
| | dress: | | , |
| The mailing addres | s and street address of the pi | rincipal office of the Limited Liability Com | pany is: Salata and the |
| Principal Office A | ddress: 1, 19 1 19 19 19 19 | . Mailing Address: | |
| 450 Lake Whitney Place | 9 () | Jack Hamilton c/o L.I.C.R. | The light of the subject |
| Port Saint Lucie, FL 34 | | 320 West Montauk Highway | A Commence of the Commence of |
| | | Hampton Bays, NY 11946 | |
| (The Limited Liability Co | | l Office, & Registered Agent's Signature tered Agent. You must designate an individual or another | |
| The name and the F | Florida street address of the r | registered agent are: | SECRE ISION |
| | John C. Hamilton | | |
| Name | | | 7 C. P. C. |
| | ₹ 3990 | | |
| | Florida street add | dress (P.O. Box <u>NOT</u> acceptable) | င္း ္ကိုပ္ရ |
| | Port Saint Lucie | FL 34986 | ယ္ 🚉 |
| | City, State, | and Zip | F TORKS |
| Having been name | ed as registered agent and to | accept service of process for the above stated | d limited |

ltability 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 of provided for in Chapter 608, F.S..

Register of Agent's Signature

(CONTINUED) Page 1 of 2

(H070000 603

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

| Use attachment if necessary) TCLE V: Effective date, if other than the date of filing:(OPTION) | M | GRM | | | John C. Hamilton |
|--|--------------------------|--|--|---|--|
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| REQUIRED SIGNATURE: Signature of a member or an authorized representative of a member. | ICLE effec 90 da | EV: Effective of the date is listys after the date | date, if other the ted, the date rate of filing.) GNATURE: | nust be sp | ecific and cannot be more than five business |
| 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 periury | ICLE effec 90 da | EV: Effective of the date is listys after the date | date, if other the ted, the date rate of filing.) GNATURE: Signature of a (In accordance of this document) | member or | an authorized representative of a member. 608.408(3), Florida Statutes, the execution an affirmation under the penalties of periory |
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