

Division of Corporations

Page 1 of 1

L070000171407375

Florida Department of State
Division of Corporations
Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H07000171407 3)))



H070001714073ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number: (850) 205-0383

From: Account Name: C. T. CORPORATION SYSTEM
Account Number: FCA000000023
Phone: (850) 222-1092
Fax Number: (850) 878-5926

LS

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Orlando Officecenter, LLC

Certificate of Status	1
Certified Copy	1
Page Count	03
Estimated Charge	\$160.00

RECEIVED

07 JUL -2 PM 4:23

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2007 JUL -2 AM 11:21

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Orlando Offcenter, LLC

(Must end with the words "Limited Liability Company," "L.L.C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:

c/o Green R. Goldman, Timonium One

1966 Greenspring Drive Suite 508

Timonium, MD 21093

Mailing Address:

c/o Green R. Goldman, Timonium One

1966 Greenspring Drive Suite 508

Timonium, MD 21093

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

(The Limited Liability 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:

C.T. Corporation System

Name

4200 South Blue Island Road

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

Plantation, FL 33324

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.

C.T. Corporation System

Connie Byrne

Registered Agent's Signature (REQUIRED)

CONNIE BYRNE

SPECIAL ASSISTANT SECRETARY

2008 JUL -2 AM 11:21
CLERK OF STATE
TALLAHASSEE, FLORIDA

FILED

(CONTINUED)

Page 1 of 2

REC-10/2008 C.T. System Online

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

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR

David J. Bawar

1261 Gulf of Mexico Drive, Apt. 1107

Long Boat Key, FL 34228

(Use attachments if necessary)

ARTICLE V- Effective date, if other than the date of filing: _____ (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:



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

(In accordance with section 602.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

Jordan I. Bellowitz, Authorized Representative

Typed or printed name of filer

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 500 Certificate of Status (Optional)

Page 2 of 2

FILED - 2007 JUL 2 AM 11:21

FILED
2007 JUL -2 AM 11:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA