

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.

(((H070001778393)))



H070001778393ABC9

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 : EXPRESS CORPORATE FILING SERVICE INC.

Account Number : FCA000000027 Phone : (305)444-4994

Fax Number : (305) 444-4977

O7 JUL II AM 8: 40

# FLORIDA/FOREIGN LIMITED LIABILITY CO.

RECEIVED
7 JUL 11 AM 11: 37
SECHETAIN OF STATE

## 36 STREET, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

덿

Electronic Filing Menu

Corporate Filing Menu

Help

https://efile.sunbiz.org/scripts/efilcovr.exe

07/11/2007

### (((H07000177839)))

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I -

Name: The name of the Limited Liability Company is:

36 STREET, LLC

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

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Linklity

Company is:

Principal Office Address:

Mailing Address:

3550 NW 36 ST. MIAMI, FL 33142 3550 NW 36 ST

**MIAMI, FL 33142** 

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designed an individual or another business entity with an active Florida registration.)

The name and the Flórida street address of the registered agent are:

#### ROBERTO NAPARSTEK Name

3550 NW 36 ST Florida street address (P.O. Box NOT acceptable)

> MIAMI, FL 33142 FL 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 hiphylded for in Chapter 608, F.S.

.. Registered Agent's Signature (REQUIRED)

## (((H07000177839)))

#### (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:

Name and Address: "MGR" = Manager "MGRM" = Managing Member MGR ROBERTO NAPARSTEK 3550 NW 36 ST MGR (Use attachment if necessary) . (OPTIONAL) ARTICLE V: Effective date, if other than the date of filing:----(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: SIGNA

(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.)

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

ROBERTO NAPARSTEK Typed or printed name of signed

Title: