

Division of Corporations

Page 1 of 1

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.

(((H08000016723 3)))



H080000167233ABC.

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) 617-6383

T. CLINE

## From:

Account Name : LLOYD GRANET  
Account Number : 074632001025  
Phone : (561) 999-9300  
Fax Number : (561) 999-9400

JAN 23 2008

EXAMINER

## FLORIDA/FOREIGN LIMITED LIABILITY CO.

7561 NW 46th Street LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

RECEIVED

08 JAN 22 AM 6:56

SECRETARY OF STATE  
TALLAHASSEE, FLORIDASECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2008 JAN 22 AM 8:38

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

Fax Audit: H08000016723 3

**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the limited liability company is:

**7561 NW 46th Street LLC**

**ARTICLE II - Address:**

The mailing and street address of the principal office of the limited liability company is:

c/o Austin International Realty  
95 Forest Avenue  
Locust Valley, NY 11560

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

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

**LLOYD GRANET, P.A.  
2295 NW CORPORATE BLVD, STE. 235  
BOCA RATON, FL 33431-7330**

*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.*

By: Registered Agent's Signature

(In accordance with section 608.403(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

**Lloyd Granet**

Typed or printed name of signee

FILED  
2008 JAN 22 AM 8:38  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA