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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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NAME: 209 FLORIDA AZ RIVER, LLC

TYPE OF FILING: **ARTICLES OF ORGANIZATION**

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AUTHORIZATION: **ABBIE/PAUL HODGE**

ARTICLES OF ORGANIZATION
OF
209 FLORIDA AZ RIVER, LLC
Under s. 608.407 Florida Statutes

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TALLAHASSEE, FLORIDA

ARTICLE I

The name of the Limited Liability Company is:
209 Florida AZ River, LLC

ARTICLE II

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

Principal Office Address:	**Mailing Address:**
63 Argyle Street Rochester, New York 14604	P. O. Box 26324 Rochester, New York 14626

ARTICLE III

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

Florida Filing & Search Services, Inc.
155 Office Plaza Drive, ' A
Tallahassee, Florida 32301

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 609, F.S.

R D Hodge 6/19/08
Registered Agent's Signature

ARTICLE IV

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

Title:	Name and Address:
MGRM	Stephen DiGennaro 63 Argyle Street, Apartment 1 Rochester, New York 14607

IN WITNESS WHEREOF, I have subscribed this document and do hereby affirm the foregoing as true under penalties of perjury this 17th day of June, 2008.

Samuel J. Ianacone JR. Esq.
Authorized Representative

Samuel J. Ianacone, Jr., Esq.
Typed name of signee