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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694

Fax Number : (305)633-9696

### FLORIDA/FOREIGN LIMITED LIABILITY CO.

455 ne 37th street llc

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

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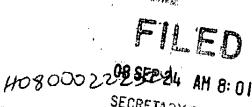
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#### ARTICLES OF ORGANIZATION FOR 455 NE 37TH STREET LLC

#### ARTICLE I Name

The name of the Limited Liability Company is 455 NE 37TH ST LLC.

### ARTICLE II

#### Address

The mailing address and street address of the principal office of the Limited Liability Company is: 10448 Milburn Lane, Boca Raton, FL 33498-4614.

# ARTICLE III Duration

This period of duration for the Limited Liability Company shall be: PERPETUAL.

### ARTICLE IV Purpose

This Limited Liability Company is organized for the purpose of transacting any or all lawful business for which corporations may be incorporated under the Florida Limited Liability Company Act.

# ARTICLE V Registered Agent

The street address of the initial registered office of the Limited Liability Company shall be LISA I. GLASSMAN, P.A., 18851 NE 29th Avenue, Suite 700, Aventura, FI 33180 and the name of the initial registered agent of the Limited Liability Company at that address is Lisa I. Glassman, Esq.

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#### ARTICLE VI

#### Management

The Limited Liability Company is to be managed by one (1) manager and the name and the address of the manager is:

William Neiman 10448 Milburn Lane Boca Raton, FL 33498-4614

# ARTICLE VII Effective Date

Pursuant to Florida Statute Section 608.409, the Limited Liability Company's existence shall be effective as of September 18, 2008, which is within five (5) business days prior to the date these Articles of Organization are filed with the Department of State.

The undersigned authorized representative of a member of 455 NE 37TH ST LLC hereby executes these articles of organization on this 24 day of September, 2008.

WILLIAM NETMAN

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### CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO BE DESIGNATED A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

- 1. The name of the Limited Liability Company is 455 NE 37TH ST LLC.
- 2. The name and the Florida street address of the registered agent and office are:

Lisa I. Glassman, Esq. LISA I. GLASSMAN, P.A., 18851 NE 29<sup>th</sup> Avenue, Suite 700 Aventura, Fl 33180

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.

Lisa I. Glassman, Esq.

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