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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 Phone : (850)222-1092 Fax Number

: (850)878-5926

FLORIDA/FOREIGN LIMITED LIABILITY CO.

CJF 18 LLC

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

D. BRUCE

SEP 29 2008

EXAMINER

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9/26/2008

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

CJF 18 LLC		
(Must end with the words "Li	nited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Address: The mailing address and street address	of the principal office of the Limited Liability	· Сопрапу is:
Principal Office Address:	Mailing Address:	
353 West 47th Street, Apartment 4B	353 West 47th Street, Apartment 4B	
Miami Beach, PL 33140 ARTICLE III - Registered Agent, Re(The Limited Liability Company sannot serve as its business entity with an active Florida registration.)	Miami Beach, FL 33140 Segistered Office, & Registered Agent's Signatown Registered Agent. You must designate an individual or a	another
ARTICLE III - Registered Agent, Re (The Limited Liability Company cannot serve as its	egistered Office, & Registered Agent's Signa own Registered Agent. You must designate an individual or a	2008 S
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ARTICLE III - Registered Agent, Re(The Limited Liability Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street addres	egistered Office, & Registered Agent's Signations Registered Agent. You must designate an individual or a soft the registered agent are: Chaim Friedman Name	2008 SEP 26 SECRETARY TALLAHASSEE
ARTICLE III - Registered Agent, Re(The Limited Lightlity Company cannot serve as its business entity with an active Florida registration.) The name and the Florida street addres	egistered Office, & Registered Agent's Signa own Registered Agent. You must designate an individual or a s of the registered agent are: Chaim Friedman Name	2008 SEP 26 PH SECRETARY OF TALLAHASSEE, F

(CONTINUED)
Page 1 of 2

Registered Agent's Signature (REQUIRED)

accept the obligations of my position as registered agent as provided for in Chapter 608, F.S..

CT Corporation System

	Name and Address:
"MGR" = Manager	
"MGRM" = Managing M	ember
MGRM	Chaim Friedman
······	353 West 47th, Apartment 4B
	Miami Beach, FL 33140
	AAA
	S S
	E.O.
•	ZA
	17 C
	▶ ′
(Use attachment if necessa	ary)
•	•
LE V: Effective date, if or fective date, if or	ner than the date of filing: (OPTIO) ate must be specific and cannot be more than five business d
LE V: Effective date, if or	ner than the date of filing: (OPTIO) ate must be specific and cannot be more than five business d
LE V: Effective date, if or fective date is listed, the days after the date of filing	ner than the date of filing: (OPTION atc must be specific and cannot be more than five business deg.)
LE V: Effective date, if or fective date, if or	ner than the date of filing: (OPTION atc must be specific and cannot be more than five business deg.)
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LE V: Effective date, if or fective date is listed, the days after the date of filing REQUIRED SIGNATURES Signature (In according to this do	ner than the date of filing: (OPTION ate must be specific and cannot be more than five business dug.) RE:
LE V: Effective date, if or fective date is listed, the days after the date of filing REQUIRED SIGNATURES Signature (In according to this do	ner than the date of filing: (OPTION ate must be specific and cannot be more than five business of ag.) IE: of a member or an authorized representative of a member. cance with section 608.408(3), Florida Statutes, the execution cument constitutes an affirmation under the penalties of perjury facts stated herein are true.)

Page 2 of 2

of Registered Agent

S 30.00 Certified Copy (Optional)

S 5.00 Certificate of Status (Optional)