

L08000/00670

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.

(((H08000243677 3)))



H080002436773ABC4

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

From:
 Account Name : GERALD WEINBERG, P.C.
 Account Number : I20030000043
 Phone : (800) 342-9856
 Fax Number : (800) 354-3381

RECEIVED
 08 OCT 27 AM 9:45
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FILED
 08 OCT 27 AM 8:20
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

Spall UNIT 1817, LLC

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

(#080002436773)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

UNIT 1817, LLC

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

ARTICLE II - Address:

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

Principal Office Address:

Mailing Address:

c/o Joseph Braun
52 West 89th Street, Apartment 2A
New York, NY 10023

same

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

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Incorporating Services, Ltd., Inc.

Name

1540 Glenway Drive

Florida street address (P.O. Box **NOT** acceptable)

Tallahassee 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 provided for in Chapter 608, F.S.

Rene J. Heat, Assistant Secretary
Registered Agent's Signature (REQUIRED)

08 OCT 27 AM 8:28
SECRETARY OF STATE
TALLAHASSEE FLORIDA

FILED

(CONTINUED)

Page 1 of 2

(#080002436773)

(H08000243677 3)

ARTICLE IV- Manager(s) or Managing Member(s):

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

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGR _____

JOSEPH BRAUN

52 WEST 69TH STREET, APT. 2A

NEW YORK, NY 10023

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: _____ (OPTIONAL)

(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 SIGNATURE:

Lawrence A. Kirsch

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

(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.)

LAWRENCE A. KIRSCH, AUTH. REP

Typed or printed name of signee

FILED
08 OCT 27 AM 8:20
SECRETARY OF STATE
TALLAHASSEE FLORIDA

(H08000243677 3)