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Canada Instructions to E	Title of Officer	
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Office Use Only



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SECRETARY OF STATE
TALL AHASSEF, FI OBIDA

D. BRUCE

JAN 16 2009

**EXAMINER** 

## **COVER LETTER**

то:	Registration Division of C	Section Corporations					
CHDI	ect.	EMCC Deve	elopment, LL	_C	,		
SUBJ	ECT:		ted Liability Compa			<del></del>	
The er	closed Articles	of Organization and fee(s) are	submitted for filing	<u>}</u> .			
Please	return all corre	spondence concerning this ma	tter to the following	<b>:</b>			
	MERRILI	_ A. BOOKSTEIN					
		12.00.00	(Name of Person)				
	MERRIL	L A. BOOKSTEIN,	COUNSELO	OR AT LA	W, P.A.		
			(Firm/Company)				
	1900 GL	ADES ROAD, SUI	TE 102				
			(Address)			77	
	BOCA R	ATON, FL 33431				1,00 1,00 1,00 1,00 1,00	•
		(Ci	ty/State and Zip Code	)		HA.	Aug.
For fu	ther informatio	n concerning this matter, pleas	se call:		·	15 PARY OF SSEE.	
MER	RRILL A. I	BOOKSTEIN	at ( 561 .	361-945	4	PHI2: CF STA	
	(Nan	ne of Person)		& Daytime Tel	ephone Number	55 S	
Enclo	sed is a check	for the following amount:					
□\$125	.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Cop (additional copy	ру	\$160.00 Fili Certificate ( Certified Co (additional co	of Status &	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registrati Division Clifton B 2661 Exe	ourier Address on Section of Corporations uilding cutive Center C ee, FL 32301			

ARTICLE I - Name:	
The name of the Limited Liability Con	mpany is:
EMCC Development, LLC	
	imited Liability Company, "L.L.C.," or "LLC.")
ARTICLE II - Address:	
The mailing address and street address	s of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
1430 S. Ocean Blvd., PH-B	705 Potomac Knolls Drive
Lauderdale-by-the-Sea, FL 33062	McLean, VA 22102
ADTICLE HI Dogistanad Agant D	egistered Office, & Registered Agent's Signature:
	s own Registered Agent. You must designate an individual or another

### MERRILL A. BOOKSTEIN

Name

1900 GLADES ROAD, SUITE 102

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

BOCA RATON, FL 33431

City, State, and Zip

Having been named as registered agent and to accept service of process for the above the inited liability company at the place designated in this pertificate, I hereby accept the appointment as registered agent and agree to act in this capacity If 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..

Agent's Signature (REQUIRED)

(CONTINUED) Page 1 of 2

# The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member MGRM Michael S. Pinkert 705 Potomac Knolls Drive McLean, VA 22102 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filingr\_ . (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:** Signature of a member of an authorized perposentative 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.) MERRILL A. BOOKSTEIN Typed or printed name of signee

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

\$125.00 Filing Fee for Articles of Organization and Designation

Filing Fees:

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)