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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.

### 1040 NW 4th STREET, LLC

Certificate of Status	·	0			
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J. BRYAN EXAMINER

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#### ARTICLES OF ORGANIZATION FOR

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1040 NW 4<sup>th</sup> STREET, LLC, a Florida Limited Liability Company

#### ARTICLE I-Name:

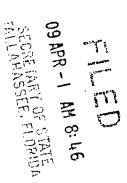
The name of the Limited Liability Company is:

1040 NW 4th STREET, LLC

#### ARTICLE II- Address:

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

531 SW 42ND AVENUE SUITE #116 MIAMI FLORIDA 33134



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

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

THOMAS G. SHERMAN, ESQ., P.A. 90 ALMERIA AVENUE CORAL GABLES, FLORIDA 33134

#### ARTICLE IV PURPOSE

The limited liability company shall have the authority to engage in any activity or business permitted under the laws of the United States and of the law of the State of Florida, and the law of any other jurisdiction wherein it may conduct business. This limited liability company may conduct business within or without the State of Florida anywhere in the world that it may so select.

## ARTICLE V

Votes of the members shall be in proportion to their contributions to the capital of the limited liability company as adjusted from time to time, to properly reflect any additional contributions or withdrawals of capital by the members.

#### ARTICLE VI-Management (Check box if applicable)

	The Limites	d Liability	Company is	s to be mar	raged by	one n	nanager	or t	nore
manage	ers and is, th	erefore, a r	nanager-ma	anaged cor	npany.				

\_\_X\_\_ The Limited Liability Company is to be managed by its members and is, therefore, a member-managed company.

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#### ARTICLE VII MANAGING-MEMBERS

The Managing-Members of the Limited Liability Company are:

 COINCO INVESTMENT COMPANY, INC., a Florida corporation 531 SW 42ND AVENUE
SUITE #116
MIAMI FLORIDA 33134

Print Name: THOMAS G. SHERMAN, ESQ. P.A. Authorized Representative of a Manager

(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.)

Having heen 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 sm familiar with and accept the obligations of my position as registered agent as provided for in chapter 608, F.S.

THOMAS G. SHERMAN, ESQ. P.A. REGISTERED AGENT'S SIGNATURE

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