# L090000909

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SEP 2 2 2009

**EXAMINER** 



ACCOUNT NO. : I2000000195

REFERENCE: 129227

500012 129227

AUTHORIZATION : C

COST LIMIT : \$ 125.00

ORDER DATE: September 18, 2009

ORDER TIME : 2:42 PM

ORDER NO. : 129227-005

CUSTOMER NO: 5000129

# DOMESTIC FILING

NAME: 639 US HIGHWAY 1, LLC

#### EFFECTIVE DATE:

	ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP
XXX	ARTICLES OF ORGANIZATION
PLEASE	RETURN THE FOLLOWING AS PROOF OF FILING:
	CERTIFIED COPY
XXX	PLAIN STAMPED COPY
	CERTIFICATE OF GOOD STANDING
CONTAC	T PERSON: Matthew Young - EXT. 2962

EXAMINER'S INITIALS:

109 ST 2 1 M 8: 0.3

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPA

### ARTICLE I - Name:

The name of the Limited Liability Company is:

# 639 US HIGHWAY 1, 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 Anthony Pantano, Esq.	c/o Anthony Pantano, Esq.
155 Polifly Road	155 Polifly Road
Hackensack, NJ 07601	Hackensack, NJ 07601
ARTICLE III - Registered Agent, Registered The Limited Liability Company cannot serve as its own Regist business entity with an active Florida registration.)	
The name and the Florida street address of the r	egistered agent are:

Corporation Service	ce Company
	Name
1201 Hays Street	
Florida st	reet address (P.O. Box NOT acceptable)
Tallahassee	<sub>FL</sub> 32301
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.

Corporation Service Company
BY:

Registered Agent's Signature (REQUIRED)

Matthew Young as its agent

(CONTINUED)
Page 1 of 2

<u>Title:</u> "MGR" = Manager "MGR" = Manager	Name and Address:
"MGRM" = Managing Meml	jei
MGRM	Peter J. Pinto
	c/o Anthony Pantano
	155 Polifly Road; Hackensack, NJ 0760
(Use attachment if necessary)	)
LE V: Effective date if other	than the date of filing: (OPTION
DE 1. Encoure date, n carer	must be specific and cannot be more than five business da
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ffective date is listed, the date days after the date of filing.)  REQUIRED SIGNATURE:	- Jand
ffective date is listed, the date days after the date of filing.)  REQUIRED SIGNATURE:  Signature of	·

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

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