

L10000011513

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. O'Connell FEB 1 - 2010

Moore & Van Allen

January 26, 2010

Andrew L. Nesbitt
Attorney at Law

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Florida Department of State
Registration Section
Division of Corporation
P.O. Box 6327
Tallahassee, FL 32314

Moore & Van Allen PLLC

Suite 4700
100 North Tryon Street
Charlotte, NC 28202-4003

Re: Solnik Management, LLC

Dear Sir or Madam:

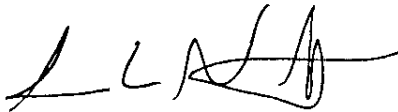
The enclosed Articles of Organization and this law firm's check in the amount of \$125.00 are submitted for filing with your office. Please return all correspondence and related documentation concerning this matter to my attention at the address, telephone number or email address listed above.

Please do not hesitate to contact me if you should have any questions or if additional information concerning this matter is required.

Thank you for your assistance in this matter.

Sincerely,

Moore & Van Allen PLLC



Andrew L. Nesbitt

ALN:kfb
Enclosures

To comply with certain U.S. Treasury regulations, we inform you that, unless expressly stated otherwise, any U.S. Federal tax advice contained in this letter, including attachments, is not intended or written to be used, and cannot be used, by any person for the purpose of avoiding any penalties that may be imposed by the Internal Revenue Service.

ARTICLES OF ORGANIZATION
FOR FLORIDA LIMITED LIABILITY COMPANY

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TALLAHASSEE, FLORIDA

ARTICLE I - Name:

The name of the Limited Liability Company is:

Solnik Management, 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:

7900 Glades Road, Suite 435
Boca Raton, FL 33433

7900 Glades Road, Suite 435
Boca Raton, FL 33433

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:

Mike Solnik

Name

7900 Glades Road, Suite 435

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

Boca Raton, FL 33433

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..


Mike Solnik

Registered Agent's Signature (REQUIRED)

(CONTINUED)

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

Mike Solnik

7900 Glades Road, Suite 435

Boca Raton, FL 33433

MGR

Esther B. Solnik

7900 Glades Road, Suite 435

Boca Raton, FL 33433

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:



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.)

Mike Solnik

Typed or printed name of signer

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TALLAHASSEE, FLORIDA

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)