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10 MAY 12 AM 10:42

DEPT. OF REVENUE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

B. KOHR
MAY 12 2010
EXAMINER

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DEPT. OF REVENUE
DIVISION OF CORPORATIONS
10 MAY 12 PM 1:59



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 380284 4370848

AUTHORIZATION

Spuddean

COST LIMIT : \$ 125.00

SECRETARY OF STATE
DIVISION OF CORPORATIONS
10 MAY 12 PM 1:59

ORDER DATE : May 11, 2010

ORDER TIME : 5:0 PM

ORDER NO. : 380284-005

CUSTOMER NO: 4370848

DOMESTIC FILING

NAME: WYNWOOD HOLDINGS, LLC

EFFECTIVE DATE:

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- XX PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Troy Todd - EXT. 2940

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

RECEIVED
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DIVISION OF CORPORATIONS
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ARTICLE I - Name:

The name of the Limited Liability Company is:

Wynwood Holdings, 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 M Management, Inc.
215 Coles Street
Jersey City, NJ 07024

c/o M Management, Inc.
215 Coles Street
Jersey City, NJ 07024

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:

Corporation Service Company
Name

1201 Hays Street
Florida street address (P.O. Box NOT acceptable)

Tallahassee FL 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.

BY:  **Troy Todd**
Registered Agent's Signature (REQUIRED) **as its agent**

(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:

MGRM

Marker Properties, LLC

215 Coles Street

Jersey City, NJ 07024

(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:



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.)

Michael Schindler

Typed or printed name of signee

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)