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SECRETARY OF STATE
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JUL 1 6 2010

EXAMINER

COVER LETTER

TO:	Registration S Division of Co					
SUBJ	ECT:	8029 NE Miami	Court LLC			
		Name of Limited	Liability Company			
The er	sclosed Articles o	f Organization and fee(s) are su	bmitted for filing.			
Please	return all corresp	oondence concerning this matter	to the following:			
	Fred	E. Glickman, Esquire				
		N	ame of Person			
	Fred E. Glick	man, P.A.				
		F	irm/Company			
	9200 S. Dade	eland Boulevard, Suite 508				
			Address			
	Miami, Florida	a 33156			SECRET	270
		City/	State and Zip Code			. 24
	feglickmanpa	@kwglawoffices.com	-		SS 5	
		E-mail address: (to be used for	future annual report notification	on)	THE R	f."
For fu	rther information	concerning this matter, please c	all:		STATE STATE	Ĩ
Fred	E. Glickman,		at (_305) 670-09)	
	Name	of Person	Area Code & Daytime	Telephone Num	ber	
Enclo	sed is a check for	or the following amount:				
☑\$125	.00 Filing Fee	□\$130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & Certified Copy (additional copy is enclosed	Certifica (1) Certifie	Filing Fee, ate of Status & d Copy al copy is enclosed)	
		Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Add Registration Section Division of Corpora Clifton Building 2661 Executive Cen Tallahassee, FL 323	itions		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

8029 NE Miami Court LLC (Must end with the words "Limited Liability	y Company "L.L.C." or "LLC.")
ARTICLE II - Address:	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
9200 S. Dadeland Boulevard, Suite 508 Miami, Florida 33156	9200 S. Dadeland Boulevard, Suite 508 Miami, Florida 33156
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the refred E. Glickman, Esquire	red Agent. You must designate an individual or another
Name	TATE ORIO
9200 S. Dadeland Bouleva	ard, Suite 508
Florida street addr	ess (P.O. Box <u>NOT</u> acceptable)
Miami, Florida 33156	FL
City, Stat	e, and Zip
liability company at the place designated in th registered agent and agree to act in this capacity. statutes relating to the proper and complete per	ccept service of process for the above stated limited is certificate, I hereby accept the appointment as I further agree to comply with the provisions of all formance of my duties, and I am familiar with and tered agent as provided for in Chapter 608, F.S

(CONTINUED)
Page 1 of 2

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	Fred E. Glickman, Esquire
	9200 S. Dadeland Boulevard, Suite 508
	Miami, Florida 33156
	AS E
(Use attachment if necessary)	
CLE V: Effective date, if other than the	date of filing: . (OPTIONAL
effective date is listed, the date must be	e date of filing: (OPTIONAL ne specific and cannot be more than five business days
0 days after the date of filing.)	E. O. P.
	LON TO THE
	RIDE
REQUIRED SIGNATURE:	D O
9	er 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.)

Typed E. Blickman

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)