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AUG - 9 2010

EXAMINER

DIVISION OF CORPORATIONS

10 AUG -9 PM 1-50



ACCOUNT NO. : I2000000195 REFERENCE: 472259 4719086 AUTHORIZATION : COST LIMIT : ORDER DATE: August 6, 2010 ORDER TIME: 4:28 PM ORDER NO. : 472259-005 CUSTOMER NO: 4719086 DOMESTIC FILING NAME: RZLBN REALTY CO. LLC EFFECTIVE DATE: ARTICLES OF INCORPORATION ___ CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: _ CERTIFIED COPY ___ PLAIN STAMPED COPY

EXAMINER'S INITIALS:

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Susie Knight - EXT. 2956

ARTICLE I - Name:	FOR FLORIDA LIMITED LIABILITY COMPANY
The name of the Limited Liability Co.	mpany is:
RZLBN Realty Co. LLC	
(Must end with the words "L	imited Liability Company, "L.L.C.," or "LLC.")
	s of the principal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
9801 Collins Avanua	9801. Collins Avenue
	Sulte 101
Suile 101	SUITE 101
Suite 101 Bal Herbor, FL 33154	Bel Harbor, FL 33154
Bal Harbor, Fl. 33154 ARTICLE III - Registered Agent, R	Bel Harbor, FL 33154 Registered Office, & Registered Agent's Signature: ts own Registered Agent. You must designate an individual or another

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 gravided for in Chapter 608, F.S.

City, State, and Zip

Florida street address (P.O. Box <u>NOT</u> acceptable) pl. 33141

Registered Agent Signature (REQUIRED)

Name

6899 Collins Avenue, Suite 2103

Miami Beach,

(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:

"MGR" = Manager "MGRM" = Managing Mem	Name and Address:
MGRM	Richard Z. Lipsky
	6899 Coilins Avenue Suite 2103
	Memi Beech , FL 33141
4.4	

	/*************************************
(Use attachment if necessary)
ICLE V: Effective date, if other	r than the date of filing: (OPTIONAL) e must be specific and cannot be more than five business days [)
ICLE V: Effective date, if other is effective date is listed, the date 90 days after the date of filing. REQUIRED SIGNATURE	r than the date of filing: (OPTIONAL) te must be specific and cannot be more than five business days [
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\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)