

Aug 23 00 09:15a

Florida Incorporation

13056752811

p.1

L10000088725

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H10000188324 3)))



H100001883243ABC.

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : CSH SERVICES, LLC
Account Number : I20C70000160
Phone : (800) 494-3124
Fax Number : (561) 455-9885

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**FLORIDA LIMITED LIABILITY CO.
423 Lafayette LLC**

Certificate of Status	0
Certified Copy	0
Page Count	02
Estimated Charge	\$125.00

L. SELLERS

AUG 24 2010

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 AUG 23 AM 9:59

FILED

RECEIVED

10 AUG 23 AM 10:43

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

H100,001883243

**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY**
In compliance with Chapter 608 and/or 621, F.S.

ARTICLE I NAME

The name of the Limited Liability Company is:

423 LAFAYETTE LLC

ARTICLE II ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is:

6364 NW 25TH WAY
BOCA RATON, FLORIDA 33496

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT SIGNATURE**

The name and the Florida street address of the registered agent are:

HOWARD SCHWARTZ
6364 NW 25TH WAY
BOCA RATON, FLORIDA 33496

Having been named as registered agent 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.

X


HOWARD SCHWARTZ / Registered Agent's signature

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

10 AUG 23 AM 9:59

FILED

H100001883243

PAGE 2

423 LAFAYETTE LLC

ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER

HELENE SCHWARTZ

6364 NW 25TH WAY

BOCA RATON, FLORIDA 33496

MANAGING MEMBER

HOWARD SCHWARTZ

6364 NW 25TH WAY

BOCA RATON, FLORIDA 33496

MANAGING MEMBER

STEFANI SCHWARTZ

238 EAST 36TH STREET

NEW YORK, NEW YORK 10016

X

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.

Howard Schwartz
PRINTED NAME OF SIGNEE