

Florida Department of
Division of Corporations
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To:

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

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
Fax Number : (305) 633-9696

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

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FLORIDA LIMITED LIABILITY CO.
s & e castle, llc

Certificate of Status	0
Certified Copy	1
Page Count	02
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SEP 29 2010

EXAMINER

H10000213851

**ARTICLES OF ORGANIZATION
FOR
S & E CASTLE, LLC**

ARTICLE I - Name

The name of the Limited Liability Company is **S & E Castle, LLC**

ARTICLE II - Address

The mailing address and street address of the principal office of the Limited Liability Company is **60 West Tropical Way, Plantation, FL 33317**

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature

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

**Joel E. Greenberg, Esq.
4300 N. University Drive
Suite D-106
Lauderhill, FL 33351**

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 808, P.S.

JOEL E. GREENBERG, Registered Agent

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:

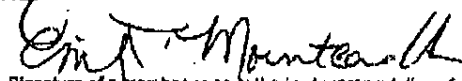
MGRM

**A. E. Mountcastle, Jr.
60 W Tropical Way
Plantation, FL 33317**

MGRM

**Emily T. Mountcastle
60 W Tropical Way
Plantation, FL 33317**

REQUIRED SIGNATURE



Signature of a member or an authorized representative of a member.

EMILY T. MOUNTCASTLE

Typed or printed name of signer

(In accordance with Section 808.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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