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Florida Department of State  
Division of Corporations  
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To: Division of Corporations  
Fax Number : (850) 617-6383

L. SELLERS

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

OCT 28 2010

EXAMINER

\*\*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.  
brookman-fels at presidential llc

Certificate of Status	0
Certified Copy	1
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Electronic Filing Menu

Corporate Filing Menu

Help

3

H10000235091

ARTICLES OF ORGANIZATION FOR  
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I  
Name

The name of the Limited Liability Company is:

BROOKMAN-FELS AT PRESIDENTIAL LLC

ARTICLE II  
Address

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

16375 NE 18<sup>th</sup> Avenue, Suite 225  
North Miami Beach, FL 33162

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

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

Ira R. Shapiro  
16375 NE 18<sup>th</sup> Avenue, Suite 225  
North Miami Beach, FL 33162

*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.*

  
Ira R. Shapiro, Registered Agent

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**ARTICLE IV**  
**Management**

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed company. The names of the managers are as follows:

Jonathan E. Fels  
16375 NE 18<sup>th</sup> Avenue, Suite 225  
North Miami Beach, FL 33162

Michael Levy  
16375 NE 18<sup>th</sup> Avenue, Suite 225  
North Miami Beach, FL 33162

  
\_\_\_\_\_  
Jonathan E. Fels, Manager

Date: \_\_\_\_\_, 2010

*(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.)*

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