

Division of Corporations

1 of 1

L100002425453

Florida Department of State
Division of Corporations
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L. SELLERS

NOV - 9 2010

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

EXAMINER

From: Account Name : GREENSPOON MARDER, P.A.
Account Number : 076064003722
Phone : (888) 491-1120
Fax Number : (954) 343-6962

Michelle Narea-Popu

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.
843 WASHINGTON, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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TALLAHASSEE, FLORIDA
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Fax Message

To: 18506176383
Fax: 18506176383
From: Michelle Narea-Popu
Greenspoon Marder, P.A.
Date: 11/8/2010 10:33 AM
Pages: 1 of 6 (including this page)
Subject: 843 washington llc

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TALLAHASSEE, FLORIDA

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**ARTICLES OF ORGANIZATION
OF**

843 WASHINGTON, LLC

ARTICLE I - Name:

The name of the Limited Liability Company is 843 WASHINGTON, LLC

ARTICLE II - Duration:

The period of duration for the Limited Liability Company shall begin with the filing of these Articles with the Florida Department of State, and shall exist perpetually, unless sooner dissolved in accordance with the Operating Agreement of the Limited Liability Company or Florida law.

ARTICLE III - Address:

The mailing address and street address of the principal office of the Limited Liability Company is 9601 Collins Avenue, Apartment 406, Bal Harbour, Florida 33154.

ARTICLE IV - Registered Agent:

The name and address of the initial registered agent for this Limited Liability Company is Laurence I. Blair, 100 W. Cypress Creek Road, Suite 700, Fort Lauderdale, Florida 33309.

ARTICLE V - Management:

The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of the initial manager(s) who is/are to serve as manager(s) is/are:


Edith Wigoda 9601 Collins Avenue, Apartment 406, Bal Harbour, Florida 33154.

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Whereof the undersigned authorized representative of the member has executed these
Articles this 5th day of November 2010.



LAURENCE I. BLAIR
Authorized Representative of Member

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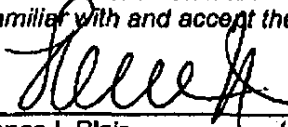
CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

3. The name of the Limited Liability Company is:
843 WASHINGTON, LLC

4. The name and address of the registered agent and office is:
Laurence I. Blair
100 W. Cypress Creek Road, Suite 700
Fort Lauderdale, Florida 33309

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.



Laurence I. Blair (Signature) November 2010 (Date)

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