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Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : C T CORPORATION SYSTEM

Account Number : FCA000000023 : (850)222-1092 Phone

Fax Number : (850)878-5368

**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. DWPBE, LLC

Certificate of Status	0
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G. MCLEOD

NOV 18 2010

EXAMINER

11/17/2010

COVER LETTER

TO:	Registration Section Division of Corporations	
SUBJE	CT: DWPBE, LLC	
		d Liability Company
The enc	losed Articles of Organization and fee(s) are	submitted for filing.
Please n	cturn all correspondence concerning this matt	er to the following:
J	effrey Doblin	
•		Name of Person
	Aubumdale Properties, Inc.	
_		Firm/Company
	50 Tice Boulevard, Suite 320	
_		Address
¥	oodeliff Lake, New Jersey 07677	
_	Cin	/State and Zip Codo
<u>j</u> .	doblin@aubproperties.com	
	•	or future autimal report notification)
For furt	her information concerning this matter, please	call:
Jeffrey l	Doblin	at (201 930-8800 Ares Code & Daytime Telephone Number
	Name of Person	Area Code & Daytime Telephone Number
Enclose	ed is a check for the following amount:	
₫\$ 125.00	Filing Fee S130.00 Filing Fee & Certificate of Status	\$155.00 Filing Fee & S160.00 Filing Fee, Certified Copy Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street/Courier Address Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

DWPBE, LLC	d Liability Company, "L.L.C.," or "LLC.")		
(with rid with the mosts, Fitting	a Librarity Company, "L.L.C.," or "L.C.)		
ARTICLE II - Address:			
The mailing address and street address of	the principal office of the Limited Liability	y Company is:	
Principal Office Address:	Mailing Address:		
c/o Aubumdale Properties, Inc.	c/o Aubumdale Properties, Inc.	_	
50 Tics Boulevard, Suite 320	50 Tice Boulevard, Suite 320		
Woodcliff Lake, New Jersey 07677	Woodeliff Lake, New Jersey 07677		
41 South Beach Road	Name	11 —	T
	rect address (P.O. Box NOT acceptable)	IO: O3 STATE CORIDA	
Hobe Sound	FL 33455	25	
(City, State, and Zip		
liability company at the place designat registered agent and agree to act in this constatutes relating to the proper and compacted the obligations of my position accept the obligations of my position By:	nd to accept service of process for the abow ed in this certificate. I hereby accept the app apacity. I further agree to comply with the p lete performance of my duties, and I am fam is registered agent as provided for in Chapta Signature (REQUIRED)	pointment as provisions of all viliar with and	

(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:

<u>Title:</u> "MGR" = Manager "MGRM" = Managing Member	Name and Address:
MGRM	Dempsey Family Investments Limited Partnership c/o Auburndale Properties, Inc. 50 Tice Blvd, Ste 320 Woodcliff Lake, NJ 07677
(Use attachment if necessary)	11077010
	the date of filing: 11/17/2010 . (OPTIONAL) st be specific and cannot be more than five business days prior
<u>REQUIRED</u> SIGNATURE:	•
Signature of a mo	mber of an authorized representative of a member.
constitutes an affirmation u	608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated heroin are true.

I am aware that any false information submitted in a document to the constitutes a third degree felony as provided for in s.817.155, F.S.)

Benjamin Dempsey Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.08 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

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