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(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

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B. KOHR
MAY 13 2011

EXAMINER



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TO ACKNOWLEDGE SUFFICIENCY OF FILIN DEPARIMENT OF STATE DIVISION OF CORPORATION

DIVISION OF CORPORATIONS

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· <b>C</b> (	ORPORATE [When you need ACCESS to the world] .  ACCESS,	
	INC. 236 East 6th Avenue . Tallahassee, Florida 32303 P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666	<u> </u>
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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

EMPIRE IV FLO	ORIDA PORTFOLIO LLC	
	(Must end with the words "Limite	d Liability Company, "L.L.C.," or "LLC.")
ARTICLE II The mailing a		the principal office of the Limited Liability Company is:
Principal Off	fice Address:	Mailing Address:
8 HARROWS I	LANE	8 HARROWS LANE
PURCHASE N	Y 10577 s	PURCHASE NY 10577
		stered Office, & Registered Agent's Signature:
(The Limited Liab business entity w		n Registered Agent. You must designate an individual or another
(The Limited Liab business entity w	oility Company cannot serve as its ow with an active Florida registration.)	on Registered Agent. You must designate an individual or another
(The Limited Liab business entity w	oility Company cannot serve as its ow with an active Florida registration.)  d the Florida street address of	on Registered Agent. You must designate an individual or another
(The Limited Liab business entity w	oility Company cannot serve as its ow with an active Florida registration.)  d the Florida street address of	on Registered Agent. You must designate an individual or another of the registered agent are:  CH SERVICES, INC.  Name
(The Limited Liat business entity w The name and	oility Company cannot serve as its ow with an active Florida registration.)  If the Florida street address of UCC FILING & SEARCE  1574 VILLAGE SQUAL	on Registered Agent. You must designate an individual or another of the registered agent are: CH SERVICES, INC. Name
(The Limited Liab business entity w	oility Company cannot serve as its ow with an active Florida registration.)  If the Florida street address of UCC FILING & SEARCE  1574 VILLAGE SQUAL	on Registered Agent. You must designate an individual or another of the registered agent are: CH SERVICES, INC. Name RE BLVO, SUITE 100

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 608, F.S.

UCC FILING & SEARCH SERVICES, INC.

Registered Agent's Signature (REQUIRED) PREJ

(CONTINUED)
Page 1 of 2

450 1 Ot 2

The name and address of each Manager or Managing Member is as follows: Title: Name and Address: "MGR" = Manager "MGRM" = Managing Member TAX LIEN MANAGER LLC MGR 8 HARROWS LANE PURCHASE NY 10577 (Use attachment if necessary) NOTE: An additional article must be added if an effective date is requested. REQUIRED SIGNATURE: gnature of a member or an nuthorized representative of a momber. (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.) **RUTH A. DENNEHEY** Typed or printed name of signee Filing Fees: \$125.00 Filing Foe for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

ARTICLE IV- Manager(s) or Managing Member(s):

\$ 5.00 Certificate of Status (Optional)