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(Requestor's Name)
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JUN 3 2011

EXAMINER



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DIVISION OF CORPORATIONS

11 JUN-2 PH 12: 42

Advanced Incorporating Service, Inc. Phone: 850-222-CORP 1317 California Street Fax: 850-575-2724 P.O. Box 20396 Tallahassee, FL 32316 Email: orders@advancedincorporating.com Website: www.advancedincorporating.com NAME OF ENTITY FOR OFFICE USE ONLY **PICK ONE:** CERTIFIED COPY **FILING:** _CORPORATION ____LLC ____LIMITED PARTNERSHIP ____GENERAL PARTNERSHIP ____FICTITIOUS NAME ____SERVICEMARK/TRADEMARK ____AMENDMENT __FOREIGN QUALIFICATION ____JUDGMENT LIEN ____OTHER_____ **RETRIEVAL:** ____GOOD STANDING CERT/C.U.S. ____CERTIFIED COPY ____PHOTOCOPY **APOSTILLE/CERTIFICATION REQUEST:** Country_____

DATE 6/2/11 TIME 12:00

Amount of Documents _____

Notes:_____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

1705 Whitehall 205, LLC, a Florida Limited Liability Company

(Must end with the words "Limited Liability Company, "L.I.,C.," or "LLC.")

ARTICLE II - Address:

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

Principal Office Address:	Mailing Address:
4000 Hollywood Boulevard, Suite 500-N	4000 Hollywood Boulevard, Suite 500-N
Hollywood, Florida 33021	Hollywood, Florida 33021

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature: (The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Jerald C. C	antor _
	Name
4000 Holly	wood Blvd., Suite 500-N
	Florida street address (P.O. Box NOT acceptable)
Hollywood	FL 33021
	City, State, and Zip

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..

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

$'MGR'' \approx N$	1anager	Name and Address:
'MGRM" =	Managing Member	
MGR		Avram Tezartes
		6051 N. Ocean Drive #1605
		Hollywood, Florida 33019
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	 -	
		
Use attachi	ment if necessary)	
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of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)