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N. Culligan JUN 1 0 2011

COVER LETTER

TO: Registration Section Division of Corporations		
SUBJE	CT: 2100 N. ANDREWS BLOG., LLC	
	Name of Limited Liability Company	
The end	closed Articles of Organization and fee(s) are submitted for filing.	
Please	return all correspondence concerning this matter to the following:	
	WALTER WADSWORTH Name of Person	
-	c/o PADULA + WADSWORTH CONSTRUCTION, The	
	2100 NORTH ANDREWS AVE	
-	Address	
	Pompano BEACH, FL 33069 City/State and Zip Code	
-	E-mail address: (to be used for future annual report notification)	
For furt	ther information concerning this matter, please call:	
WAL	TER WADSWORTH at (954) 974-3262	
	Name of Person Area Code & Daytime Telephone Number	
Enclos	ed is a check for the following amount:	
\$125.00	Filing Fee \$\ \text{S130.00 Filing Fee & Certificate of Status} \ \ \text{Certified Copy (additional copy is enclosed)} \ \ \ \text{Certified Copy (additional copy is enclosed)} \ \ \ \text{Certified Copy (additional copy is enclosed)} \ \ \ \ \text{Certified Copy (additional copy is enclosed)} \ \ \ \ \ \text{Certified Copy (additional copy is enclosed)} \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \	
	Mailing AddressStreet/Courier AddressRegistration SectionRegistration SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name: The name of the Limited Liability Company is:	
2100 N. ANDREWS (Must end with the words "Limited Liability	
ARTICLE II - Address:	ncipal office of the Limited Liability Company is:
Principal Office Address:	Mailing Address:
2.100 N. ANDREWS AVE. POMPANO BEACH, FL 33069	SAME
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registered (Florida Street). Name	gistered agent are:
7216 NW (Florida street address City, State	ess (P.O. Box NOT acceptable) FL 33061

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)

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	Name and Address:
"MGRM" = Managing Member	
MORM	HARRY F. PODULA
MGRM	WALTER & WADBURTH. - 1111 LITTLE HARROR DR.
	DEBRUID BEACH, \$1 3344
(Use attachment if necessary)	
•	date of filing: (OPTIONAL)
an effective date is listed, the date must bor 90 days after the date of filing.)	e specific and cannot be more than five business days prior
•	9 • V.co
REQUIRED SIGNATURE:	I JU I SECRI
//	of protection of the second
Signature of a member	er or an authorized representative of a member.
constitutes an affirmation unde I am aware that any false infor	3.408(3), Florida Statutes, the execution of this document or the penalties of perjury that the facts stated herein are true mation submitted in a document to the Department of State y as provided for in s.817.155, F.S.)
WAL	TER E WADSWORTH /ped or printed name of signee
Τŷ	/pea or printea name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)