

11/17/11

Division of Corporations

Florida Department of State
 Division of Corporations
 Electronic Filing Cover Sheet

H11000273850

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

From:
 Account Name : HUBCO
 Account Number : 104662003400
 Phone : (516) 935-3940
 Fax Number : (516) 935-3088

**Enter the email address for this business entity to be used for future
 annual report mailings. Enter only one email address please.**

Email Address: N/A

FLORIDA LIMITED LIABILITY CO.

LEEF Properties, LLC

Certificate of Status	1
Certified Copy	0
Page Count	02
Estimated Charge	\$130.00

D. BRUCE

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EXAMINER

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SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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ARTICLES OF ORGANIZATION
FOR
FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name

The name of the Limited Liability Company is: **LEEF Properties, LLC**

ARTICLE II - Address

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

Principal Office Address:

3374 Degas Drive W.

Palm Beach Gardens, FL 33410

Mailing Address:

100 Merrick Road, Suite 314 W

Rockville Centre, NY 11570

ARTICLE III - Registered Agent, Registered Office & Registered Agent's Signature
The name and Florida street address of the registered agent are:

Liam Egan

Name

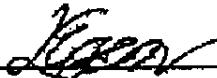
3374 Degas Drive W.

(P.O. Box or Mail Drop Box NOT Acceptable)

Palm Beach Gardens, FL 33410

(City / State / 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 - Liam Egan

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

The name and address of each Manager or Managing Member is as follows:

Title: Name and Address:

"MGR"=Manager

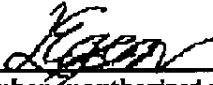
"MGRM"=Managing Member

MGR

Liam Egan - 3374 Degas Drive W., Palm Beach Gardens, FL 33410

(Use attachment if necessary)

REQUIRED SIGNATURE:


Liam Egan
Signature of a member or authorized representative of a member.

(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.)

Liam Egan

Typed or printed name of signee

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