

L11000136795

**Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H11000284222 3)))



H110002842223ABCW

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

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

From:

Account Name : CSH SERVICES, LLC
Account Number : 120070000160
Phone : (800) 494-3124
Fax Number : (561) 455-9885

****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.
FOUNTAINBLEAU 412, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$125.00

RECEIVED
11 DEC -5 AM 11:48
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 DEC -5 AM 8:13

FILED

Electronic Filing Menu

Corporate Filing Menu

T. HAMPTON

Help
DEC - 0 2011

EXAMINER

H11000284222 3

**ARTICLES OF ORGANIZATION FOR A
FLORIDA LIMITED LIABILITY COMPANY**

In compliance with Chapter 608, F.S.

FILED
2011 DEC -5 AM 8:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I NAME

The name of the Limited Liability Company is:

FOUNTAINBLEAU 412, LLC

ARTICLE II ADDRESS

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

C/O DANIEL SPITALNIC, ESQ.
305 BROADWAY, 7TH FLOOR
NEW YORK, NEW YORK 10007

**ARTICLE III REGISTERED AGENT, REGISTERED OFFICE &
REGISTERED AGENT SIGNATURE**

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

DANIEL SPITALNIC
5118D LAKE CATALINA DRIVE
BOCA RATON, FLORIDA 33496

Having been named as registered agent 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.

X



DANIEL SPITALNIC / Registered Agent's signature

H11000284222 3

H11000284222 3

PAGE 2 FOUNTAINEBLEAU 412, LLC

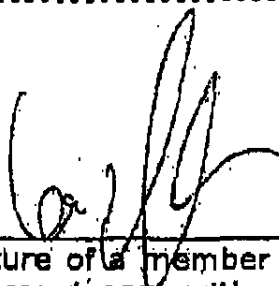
ARTICLE IV MANAGEMENT

The Limited Liability Company is to be managed by one or more members and is, therefore, a Member Managed Company.

ARTICLE V MEMBERS (optional)

MANAGING MEMBER
NEW BEDFORD LTD
C/O DANIEL SPITALNIC, ESQ.
305 BROADWAY, 7TH FLOOR
NEW YORK, NEW YORK 10007

FILED
2011 DEC -5 AM 8:13
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

.....

X _____
Signature of a member or an 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.

NEW BEDFORD LTD

H11000284222 3