

L12000057742

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

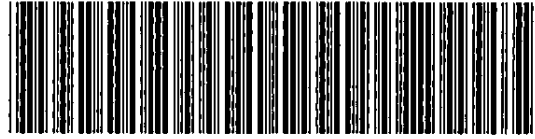
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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APR 30 2012



CORPORATION SERVICE COMPANY

ACCOUNT NO. : I20000000195

REFERENCE : 185021 4301683

AUTHORIZATION :

Spaldeman

COST LIMIT : \$ 125.00

ORDER DATE : April 27, 2012

ORDER TIME : 2:32 PM

ORDER NO. : 185021-005

CUSTOMER NO: 4301683

DOMESTIC FILING

NAME: WALDMAN RAMPART AGENCY LLC

EFFECTIVE DATE:

_____ ARTICLES OF INCORPORATION
_____ CERTIFICATE OF LIMITED PARTNERSHIP
XX _____ ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

_____ CERTIFIED COPY
XX _____ PLAIN STAMPED COPY
_____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Becky Peirce - EXT. 2919

EXAMINER'S INITIALS: _____

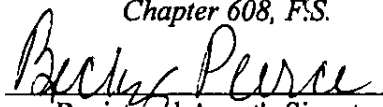
ARTICLES OF ORGANIZATION
OF
WALDMAN RAMPART AGENCY LLC

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned, an authorized representative, for the purpose of forming a limited liability company pursuant to Chapter 608, Florida Statutes, hereby certifies as follows:

1. The name of the limited liability company (the "Company") is Waldman Rampart Agency LLC.
2. The mailing address and street address of the principal office of the Limited Liability Company is: 40 SE 5th Street, Suite 501, Boca Raton, Florida 33432.
3. The address of the registered agent of the Company in the State of Florida is 1201 Hays Street, in the City of Tallahassee, Florida 32301. The name of its registered agent at such address is Corporation Service Company ("CSC").

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

Becky Peirce ..
Assistant Vice President

4. The name and address of each Manager is as follows:

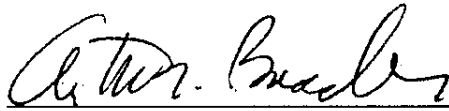
Howard Blatt
One Parker Plaza, Suite 1105
Fort Lee, NJ 07024

Stanley Morris
1983 Marcus Avenue, Suite C130
Lake Success, NY 11042-5494

Glen Waldman
40 SE 5th Street, Suite 501
Boca Raton, Florida 33432

5. The name and address of the undersigned authorized representative is as follows:
Arnold N. Bressler, Esq. c/o Moses & Singer LLP, 405 Lexington Avenue, New York, New York 10174.

IN WITNESS WHEREOF, the undersigned authorized representative signs his name and affirms that the statements made in this Certificate are true and correct under the penalty of perjury, this 27th day of April, 2012. He is aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.



Arnold N. Bressler, Authorized Representative

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