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A	CERTIFIED COPY		700
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2.	(CORPORATE NAME AND DOC	CUMENT #)	······································
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<i>5</i> .	(CORPORATE NAME AND DOC	CUMENT #)	
6.	(CORPORATE NAME AND DOC	CUMENT#)	
SPECIA	L INSTRUCTIONS:		

ARTICLES OF ORGANIZATION: FOR FLORIDA LIMITED LIABILITY COMPANY



ARTICLE I - Name:

The name of the Limited Liability Company is 726 COLLINS AVENUE LLC

ARTICLE II - Address:

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

21 Legend Circle Melville, New York 11747

ARTICLE III - Registered Agent, Registered Office and Registered Agent's Signature:

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

UCC Filing & Search Services, Inc. 1574 Village Square Blvd. Tallahassee, FL 32309

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 ad 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

PRESIDENT

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

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

Title:

Name and Address:

"MGRM"

Albert Kim P.O. Box 604 Stony Brook, NY 11790

REQUIRED SIGNATURE:		
	1	

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.)

Albert Kim, Authorized Person