Fax Se Page 1 of 1 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. (((11130000397673))) H130000397673ABC3 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 (050)617-6383 Fax Number From: : GREENSPOON MARDER, P.A. Account Name Account Number : 076064003722 2013 FEB 20 Phone (888)491-1120 5 Fax Number : (954)343+6962 **Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.** Email Address: Callos 2 hopefor vision 10 æ a la construction de la construc دی دنه FLORIDA LIMITED LIABILITY CO. 12 FROM 4, LLC Certificate of Status 0 Certified Copy 1 Page Count 03 \$155,00 Estimated Charge ECENED Electronic Filing Monu Corporate Filing Menu Help FEB 2 1 2013 T CLINE

ARTICLES OF ORGANIZATION

OF

12 FROM 4, LLC

ARTICLE I - Name:

The name of the Limited Liability Company is 12 FROM 4, LLC.

ARTICLE II - Duration:

The period of duration for the Limited Liability Company shall begin with the filling of these Articles with the Florida Department of State, and shall exist perpetually, unless sooner dissolved in accordance with the Operating Agreement of the Limited Liability Company or Florida law.

ARTICLE III - Address:

The mailing address and street address of the principal office of the Limited Liability Company is 21050 Point Place, Apt 2803, Aventura, Florida 33180.

ARTICLE IV - Registered Agent:

The name and addre	ess of the initial registered agent for this Limited Li	ability Compar	iy is	
The name and address of the initial registered agent for this Limited Liability Laurence I. Blair, 2255 Glades Road, Suite 414E, Boca Raton, Florida 33431. ARTICLE V - Management:		AH	ll 9 FEB	
		1ARY ASSE	20	and the second
The Limited Liability Company is to be managed by a manager. The name and address				177
of the initial manager is to serve as manager for the limited liability company is:			ළද	he of
	21050 Delet Diese, Art 2802, Augusture Eloride		မ္မ	
Carlos Lidsky	21050 Point Place, Apt 2803, Aventura, Florida	33100.		

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WHEREOF, the undersigned authorized representative of the member has executed these Articles the \underline{ML} day of \underline{KL} , \underline{ML} , 2013.

Carlos Lidsky Authorized Representative of Member



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CERTIFICATE OF DESIGNATION OF

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REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

12 FROM 4, LLC

2. The name and address of the registered agent and office is:

Laurence I. Blair 2255 Glades Road, Suite 414E Boca Raton, Florida 33431

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 duttes, and I am familipity with and accept the obligations of my position as registered agent.

Laurence I. Blair (Sig

(Signature)

(Date)



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