(Requestor	s Name)
(Address)	
(Address)	
(City/State/	Zip/Phone #)
PICK-UP	WAIT MAIL
(Business E	Entity Name)
(Document	Number)
Certified Copies C	ertificates of Status
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800253132578

Effective Date 10-31-13

11/04/13--01030--017 **130.00



COVER LETTER

TO:

Registration Section Division of Corporations

Mizner on the Green Development LLC

Name of Limited Liability Company

The enclosed Articles of Organization and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Marc S	handler					
		Name of Person		·····		
Elad Na	ational Proper	ties				
		Firm/Company				
1000 S	. Pine Island r	oad				
		Address				2
Plantati	on, Florida 33	3324		<u>.</u>	,	2013 N() V
		y/State and Zip Co	de		٠.	ή- Λ
oyair@ela	dnational.com				4	
	E-mail address: (to be used f	for future annual rep	port notification)			- T-
For further information	concerning this matter, please	call:			SI	9: 26
Osnat Yair		954	,846-7	800		26
Name	of Person	Area Coo	de & Daytime Tele	ephone Numbe	er	
Enclosed is a check for	or the following amount:					
□\$125.00 Filing Fee	■\$130.00 Filing Fee & Certificate of Status	□\$155.00 Fili Certified C (additional co	•	\$160.00 l Certifica Certified (additional	te of Sta Copy	tus &
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registra Division Clifton 2661 Ex	Courier Address ation Section in of Corporation Building secutive Center (ssee, FL 32301	s		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liab	bility Company is:	
Mizner on the Green Development L	rc ·	
(Must end with th	ne words "Limited Liability Company, "L.L.C.," or "L.L.C.")	
ARTICLE II - Address:		
	et address of the principal office of the Limited L	iability Company i
Principal Office Address:	Mailing Address:	
1000 S. Pine Island Road	1000 S. Pine Island Road	
Suite 450	Suite 450	
ADTICLE III - Pogistored	Agent Registered Office & Registered Agent	's Signature:
ARTICLE III - Registered (The Limited Liability Company cannot business entity with an active Florida	Agent, Registered Office, & Registered Agent'	vidual or another
ARTICLE III - Registered (The Limited Liability Company cannot business entity with an active Florida	Agent, Registered Office, & Registered Agent' of serve as its own Registered Agent. You must designate an indivergistration.) eet address of the registered agent are:	vidual or another
ARTICLE III - Registered (The Limited Liability Company cannot business entity with an active Florida The name and the Florida stro	Agent, Registered Office, & Registered Agent' of serve as its own Registered Agent. You must designate an indivergistration.) eet address of the registered agent are:	e's Signature: vidual or another 2013 NOV
ARTICLE III - Registered (The Limited Liability Company cannot business entity with an active Florida The name and the Florida stro	Agent, Registered Office, & Registered Agent' of serve as its own Registered Agent. You must designate an indivergistration.) eet address of the registered agent are: vices, Inc.	vidual or another 2013 NOV -4
ARTICLE III - Registered (The Limited Liability Company cannot business entity with an active Florida The name and the Florida stro	Agent, Registered Office, & Registered Agent? ot serve as its own Registered Agent. You must designate an indivergistration.) ect address of the registered agent are: vices, Inc. Name	vidual or another
ARTICLE III - Registered (The Limited Liability Company cannot business entity with an active Florida The name and the Florida stro NRAI Serve	Agent, Registered Office, & Registered Agent? ot serve as its own Registered Agent. You must designate an indivergistration.) eet address of the registered agent are: vices, Inc. Name	vidual or another 2013 NOV -4

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.

Peter F. Souza
Assistant Secretary

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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

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

"MGR" = Manager "MGRM" = Managing Member		
WOKW - Managing Member		
MGR	Arik Bronfman	
	1000 S. Pine Island road suite 450	
	Plantation , Florida 33324	
MGR	Orly Daniell	
	575 Madison Ave # 22 floor	
	NY , NY 10022	
Sec	Marc Shandler	
	1000 S. Pine Island road , suite 450	2
	Plantation, Florida 33324	- E
		<u>, , , , , , , , , , , , , , , , , , , </u>
		<u>ب</u> پي
(Use attachment if necessary)		- RE 26
(• • • • • • • • • • • • • • • • • • •		

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. I am 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.)

Marc Shandler
Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)