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FLORIDA LIMITED LIABILITY CO.
ALBATROSS CR ONE, LLC

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COVER LETTER

TO: REGISTRATION SECTION
DIVISION OF CORPORATION

SUBJECT: David Chaplin

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

Please return all correspondence concerning this matter to the following:

DAVID CHAPLIN, ESQ.
BELOFF PARKER JACOBS, PLC
1691 MICHIGAN AVENUE, SUITE 320
MIAMI BEACH, FLORIDA 33139

Email Address: david@beloffparker.com

$160.00 Filing Fee
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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
ALBATROSS CR ONE, LLC,
a Florida limited liability company

The undersigned, desiring to form a limited liability company for the purposes set forth herein and in conformance with the Florida Limited Liability Company Act, does hereby establish the following:

ARTICLE I- NAME:

The name of the limited liability company is: ALBATROSS CR ONE, LLC, a Florida limited liability company

ARTICLE II- ADDRESS:

The address of its principal place of business, as well as the mailing address for this limited liability company is: *Barry Weisfeld c/o Albatross CR One, LLC, 5959 Collins Avenue, Suite 1005, Miami Beach, Florida 33140*

ARTICLES III- REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

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

DAVID CHAPLIN, ESQ.
BELOFF PARKER JACOBS, PLC
1691 MICHIGAN AVENUE, SUITE 320
MIAMI BEACH, FLORIDA 33139

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.

DAVID CHAPLIN, ESQ.

ARTICLE IV

The name and address of each person authorized to manage and control the Limited Liability Company:

TITLE:	NAME AND ADDRESS:
Managing Member	David Weisfeld
Managing Member	Barry Weisfeld

ARTICLE –V -Effective Date, if other than the date of filing: _____(Optional)

ARTICLE- VI-Other provisions, if any.

REQUIRED SIGNATURE:

DAVID WEISFELD

(In accordance with Section 605.0203 (1)(b), Florida Statute, 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 s817.155, F.S.)

Send Result Report

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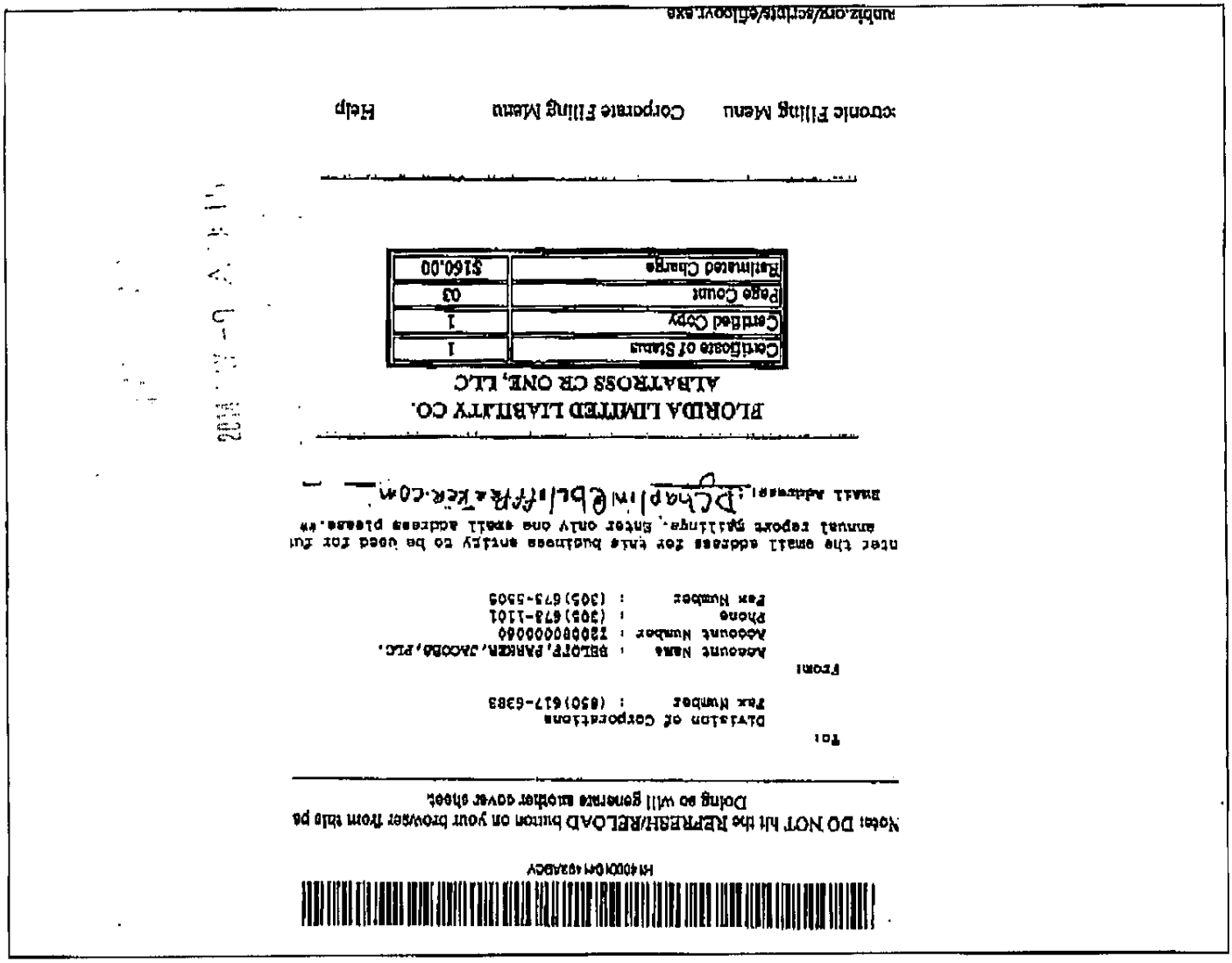

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