## L14000125883

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	

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## CT Corporation System

515 E Park Avenue, Tallahassee, FL, 32301 850-222-1092

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NORTH	FEDERAL	PLAZA,	LLC

() Nonprofit	() Amendment	() Merger
()Domestic Corporation		
	() Dissolution/Withdrawal	() Mark
() Limited Partnership	() Reinstatement	
(X) LLC	() Annual Report	() Other
Formation		
	() Name Registration	() UCC
() Certified Copy	() Fictitious Name	
		() CUS
	() Photocopies	() CUS
(x) Walk In		() After 4:30
() Mail Out	() Will Wait	(x) Pick Up
	•	
Name		
Availability	8/11/2014	Order#:
Document		9237519
Examiner	KM	
Updater		Ref#:
Verifier		
W.P. Verifier		_
		Amount: \$
	-	

## COVER LETTER

TO:	Registration Division of	s Section Corporations		
SUBJI	ECT: <u>NORT</u>	H FEDERAL PLAZA, LLC Name of Li	mited Liability Company	
The en	closed Articles	of Organization and fee(s) a	re submitted for filing.	
Please	return all corre	spondence concerning this m	natter to the following:	
	ALAN M	GRUNSPAN	Name of Person	
			Name of Person	
			Firm/Company	
	120 NIG	HTHAWK AVENUE	Address	
	PLANTA	TION, FL 33324	City/State and Zip Code	
Δι	CRUNSDANG	DCFJBLAW.COM	nty/State and Zip Code	
		E-mail address: (to be use	d for future annual report notifica	ation)
For fur	ther informatio	n concerning this matter, ple	ase call:	
ALAN	M. GRUNSP Nan	AN at (	305 ) 530-0050 Area Code Daytime Te	lephone Number
Énclose	ed is a check fo	r the following amount:		
<b>☑ \$</b> 125.0	0 Filing Fee	☐\$130.00 Filing Fee & Certificate of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street/Courier Address
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301



## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nan The name of the Li	ne: mited Liability Company is:		
NORTH FEDERA		"Limited Liability Company, "L.L.C.," or "LLC.")	
ARTICLE II - Ad The mailing addres	dress:	incipal office of the Limited Liability Company is:	
Principal Office A	ddress;	Mailing Address:	
120 NIGHTHAWI PLANTATION, F		120 NIGHTHAWK AVENUE PLANTATION, FL 33324	
(The Limited Liabil		Office, & Registered Agent's Signature: s its own Registered Agent. You must designate an inegistration.)	ndívidual or
The name and the F	lorida street address of the re	egistered agent are:	
	ALAN M. GRUNSPAN	Name	
	100 S.E. SECOND ST Florida street address (I	TREET. SUITE 4200 P.O. Box <u>NOT</u> acceptable)	
	MIAMI	FL 33131	
	14117 (1411		

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 605, F.S.

Registered Agent Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

2014 AUG 11 AM 10: 18

<u>Title:</u> "AMBR" ≈ Authorized Member "MGR" = Manager	Name and Address:
MGR	GREG STURGIS
	407 IDLEWYLD DRIVE
	FORT LAUDERDALE, FL 33301
MGR	JAIME STURGIS
	1109 TANGELO ISLE
	FORT LAUDERDALE, FL 33315
MGR	ALAN M. GRUNSPAN
	120 NIGHTHAWK AVENUE
	FORT LAUDERDALE, FL 33324
<del></del>	
EV: Effective date, if other than the date ctive date is listed, the date must be sp	e of filing: (OPTIONAL) secific and cannot be more than five business days prior to or 90
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Page 2 of 2