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12/23/15

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

2631 NE 14th Ave 205	LLC		
(Must end wit	th the words "Limite	d Liability Company,	"L.L.C.," or "LLC.")
ΓICLE II - Address:			
mailing address and street addr	ress of the principal of	office of the Limited	Liability Company is:
2631 Principal	Office Address:		Mailing Address:
2351 NE 14th Avc. # 20		803 k	Kingsley St # 2
Oakland Park, FL 3333	4	Asbu	ry Park, NJ 07712
CICLE III - Registered Agent Limited Liability Company ca	, Registered Office,	& Registered Agent	t's Signature:
FICLE III - Registered Agent	, Registered Office, nnot serve as its own ive Florida registration	& Registered Agent a Registered Agent. Yon.)	t's Signature:
FICLE III - Registered Agent Limited Liability Company ca her business entity with an acti name and the Florida street add	, Registered Office, nnot serve as its own ive Florida registration	& Registered Agent Registered Agent. Yon.) d agent are:	
FICLE III - Registered Agent Limited Liability Company ca her business entity with an acti name and the Florida street add	, Registered Office, nnot serve as its own ive Florida registration	& Registered Agent Registered Agent. Yon.) d agent are:	t's Signature:
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FICLE III - Registered Agent E Limited Liability Company ca her business entity with an acti name and the Florida street add	, Registered Office, nnot serve as its own ive Florida registration dress of the registered William F. Collins J	& Registered Agent	t's Signature: ou must designate an individual o

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's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

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Title:	Name and Address:
"AMBR" = Authorized Memb	टा
"MGR" = Manager AMBR	Steven Pavone
AMBR	803 Kingsley St. # 2
	Asbury Park, NJ 07712
E V: Effective date, if other the ective date is listed, the date in of filing.) the date inserted in this block	n the date of filing:
EV: Effective date, if other that ective date is listed, the date in of filing.) The date inserted in this block ment's effective date on the Definition.	ust be specific and cannot be more than five business days prior to or 90 does not meet the applicable statutory filing requirements, this date will no
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