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1201 Hays Street Tallhassee, FL 32301 Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE: 077965 4301184 AUTHORIZATION : COST LIMIT : ORDER DATE: February 20, 2018 ORDER TIME : 1:20 PM ORDER NO. : 077965-010 CUSTOMER NO: 4301184 DOMESTIC FILING NAME: BJGH BISCAYNE SHORES, LLC EFFECTIVE DATE: ___ ARTICLES OF INCORPORATION __ CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

EXAMINER'S INITIALS:

CORPORATION SERVICE COMPANY

XX CERTIFIED COPY

PLAIN STAMPED COPY

____ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Roxanne Turner - EXT.

COVER LETTER

TO: New Filing Section Division of Corpor	ations		
SUBJECT: <u>BJGH BISCA</u>	VNF SHADES III	C	
SOBOLET. BJOH BISCA	Name of I	Limited Liability Company	
The enclosed Articles of Orga	unization and fee(s)	are submitted for filing	
Please return all corresponder			
	, , , , , , , , , , , , , , , , , , ,		
Michael A. Zimn	nerman, Esq.		
		Name of Person	
c/o Kane Kessler, I	e C		
a remote the state of the state		Firm/Company	
666 Third Avenue	, 23 rd Floor		
		Address	
New York, New Y	ork, 10017	City/State and Zip Code	
		ony orato and pap code	
Mzimmerman@k		ed for future annual report notification	
		·	m)
For further information concern	ning this matter, plea	ase call:	
Michael A. Zimm Name of		at (212) 247-7272 Area Code Daytime Telephone	
Nume of	1 013011	Area Code Daytime Telephone	Number
Enclosed is a check for the fo	llowing amount:		
\$125.00 Filing Fee \$1	30.00 Filing Fee &	\$155.00 Filing Fee &	\$160.00 Filing Fee,
	ertificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Ac		Street Address	
New Filing Division of	Section Corporations	New Filing Section Division of Corporation	ons
P.O. Box 6	327	Clifton Building	
i allahassec	t, FL 32314	2661 Executive Center	r Circle

Tallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name: The name of the Limited Liabil	lity Company is:			
	y and program			
BJGH Biscayne S	Shores, LLC			
(Must co	ntain the words "Limited I	Liability Compa	ny, "L.L.C.," or "LLC.")	
ARTICLE II - Address:				
The mailing address and street	address of the principal of	fice of the Limit	ed Liability Company is:	
Princi	ipal Office Address:		Mailing Address	:
4800 Linton Boule	evard		1800 Linton Boulevard	
Suite F-107			Suite F-107	
Delray Beach, FL	. 33445		Delray Beach, FL 33445	
another business entity with an The name and the Florida stree	_			
		Name		
	4800 Linton Boulev	ard, Suite F-1	07	
	Florida street address	(P.O. Box <u>NO</u>	Cacceptable)	
	Delray Beach	<u>FL</u>	33445	
	City	State	Zip	
lace designated in this certificate arther agree to comply with the p	e, I hereby accept the appo provisions of all statutes re- phligations of my position to By	intment as regist Injug to the prop greyistered ager	the above stated limited liability co ered agent and agree to act in this per and complete performance of in at as provided for in Chapter 605, mature (REQUIRED)	s capacity. I
		CONTINUE	D)	

<u>l'itle:</u>	Name and Address:
'AMBR" = Authorized Member	
'MGR" = Mapager	Design
MGR A	Ronit Neuman
	4800 Linton Boulevard, Suite F-107 Delray Beach, FL 33445
Ω	Deliay beach, FL 33445
MGR (M)	Ron Ben-Josef
	c/o TAA Apparel Inc.
/	104 West 40 th Street, 14 th Floor, New York, New York 100
	104 West 40 Street, 14 Floor, New York, New York TO.
	·
EV: Effective date, if other than the	
f filing.)	be specific and cannot be more than five business days prior to or 90 d not meet the applicable statutory filing requirements, this date will not be
EV: Effective date, if other than the ctive date is listed, the date must I filling.) he date inserted in this block does nent's effective date on the Departi	be specific and cannot be more than five business days prior to or 90 d not meet the applicable statutory filing requirements, this date will not be
EV: Effective date, if other than the ctive date is listed, the date must I filling.) he date inserted in this block does nent's effective date on the Department's Other provisions, if any. REQUIRED SIGNATURE:	not meet the applicable statutory filing requirements, this date will not be nent of State's records.
EV: Effective date, if other than the ctive date is listed, the date must I filling.) he date inserted in this block does nent's effective date on the Department's effective date on the Department's CVI: Other provisions, if any. REQUIRED SIGNATURE: Signature of This document is effective date.	not meet the applicable statutory filing requirements, this date will not be nent of State's records. A member or an authorized representative of a member. Executed in accordance with section 605,0203 (1) (b), Florida Statutes.
EV: Effective date, if other than the etive date is listed, the date must liftling.) he date inserted in this block does nent's effective date on the Department's effective date of the Depart	not meet the applicable statutory filing requirements, this date will not be nent of State's records. A member or an authorized representative of a member. Executed in accordance with section 605.0203 (1) (b), Florida Statutes. To false information submitted in a document to the Department of State.
EV: Effective date, if other than the etive date is listed, the date must liftling.) he date inserted in this block does nent's effective date on the Department's effective date of the Depart	not meet the applicable statutory filing requirements, this date will not be nent of State's records. A member or an authorized representative of a member. Executed in accordance with section 605,0203 (1) (b), Florida Statutes.
EV: Effective date, if other than the etive date is listed, the date must liftling.) he date inserted in this block does nent's effective date on the Department's effective date of the Depart	a member or an authorized representative of a member. executed in accordance with section 605.0203 (1) (b), Florida Statutes. In false information submitted in a document to the Department of State legree felony as provided for in s.817.155, F.S.

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)

ARTICLE IV-