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Account Number : I20110000086 Phone : (718)569-2703 Fax Number : (718)504-7890

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FLORIDA LIMITED LIABILITY CO. UNIVERSITY PORTFOLIO LLC

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Nanie:

The name of the Limited Liability Company is:

UNIVERSITY PORTFOLIO LLC

(Must end with the words "Limited Liability Company, "L.L.C.," or "LLC.")

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

Principal Office Address:

Mailing Address:

 5014 16TH AVE #416
 5014 16TH AVE #416

 BROOKLYN, NY 11204
 BROOKLYN, NY 11204

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

(The Limited Liability Company cannot serve as its own Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

INTERSTATE AGENT SERVICES LLC

Name

1540 GLENWAY DRIVE

Florida street address (P.O. Box NOT acceptable)

TALLAHASSEE FL 32301
City State Zip

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

18 SEP 17 AM 10: 1 SECRETARY AND A

(1)

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<u>Title:</u>	Name and Address:	
"AMBR" = Authorized Member		
"MGR" = Manager	YECHESKEL MILSTEIN	
MGR	5014 16TH AVE #416	
	BROOKLYN, NY 11204	
	and an interest	
<u>MGR</u>	SHIA GRUNZWEIG	
	BROOKLYN, NY 11204	
	<u> </u>	
(Use attachment if necessary)		
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