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CORPORATION SERVICE COMPANY 1201 Hays Street Tallhassee, FL 32301

Phone: 850-558-1500 ACCOUNT NO. : I2000000195 REFERENCE: 742165 7521141 AUTHORIZATION : COST LIMIT : (ORDER DATE : April 26, 2019 ORDER TIME : 3:16 PM ORDER NO. : 742165-005 CUSTOMER NO: 7521141 DOMESTIC FILING NAME: LATITUDE DELRAY LLC EFFECTIVE DATE: __ ARTICLES OF INCORPORATION ___ CERTIFICATE OF LIMITED PARTNERSHIP XX ARTICLES OF ORGANIZATION PLEASE RETURN THE FOLLOWING AS PROOF OF FILING: __ CERTIFIED COPY XX PLAIN STAMPED COPY ____ CERTIFICATE OF GOOD STANDING CONTACT PERSON: Lydia Cohen - EXT. 62974 EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

Latitude Delray LLC (Must contain the words "Limited Liability RTICLE II - Address:	Company, "L.L.C.," or "LLC.")
ne mailing address and street address of the principal office of	the Limited Liability Company is:
Principal Office Address:	Mailing Address:
6511 Fresh Meadow Lane	6511 Fresh Meadow Lane
Flushing, New York 11365	Flushing, New York 11365
e name and the 1 forida succe address of the registered agent a	re:
Corporation Service Components Name	
Corporation Service Comp	
Corporation Service Comp	pany
Corporation Service Comp Name 1201 Hays Street	Box NOT acceptable)
Corporation Service Components Name 1201 Hays Street Florida street address (P.O. In Tallahassee	Box NOT acceptable)
Name 1201 Hays Street Florida street address (P.O. I Tallahassee	Box NOT acceptable) L 32301 ate Zip occess for the above stated limited liability company as registered agent and agree to act in this capacity the proper and complete performance of my duties ered agent as provided for in Chapter 605, F.S.

(CONTINUED)



The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager MGR Marlena Demenus 6511 Fresh Meadow Lane Flushing, New York 11365 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: _____. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. **REQUIRED SIGNATURE:** Signature of a member or an authorized representative of a member. This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. 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 s.817.155, F.S. John Nastasi Typed or printed name of signee Filing Fees: \$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-