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COVER LETTER

TO:	New Filing Section Division of Corporations
SUBJEC	40 Dune Road, LLC
	Name of Limited Liability Company
The enclo	osed Articles of Organization and fee(s) are submitted for filing.
Please re	turn all correspondence concerning this matter to the following:
	Jennifer E. Zakin, Esq.
	Name of Person
	Redgrave & Rosenthal LLP
	Firm/Company
	225 N.E. Mizner Boulevard, Suite 440
	Address
	Boca Raton, Florida 33432
	City/State and Zip Code jzakin@redgraveandrosenthal.com
	E-mail address: (to be used for future annual report notification)
For further	information concerning this matter, please call:
	Jennifer E. Zakin, Esq. 561 347-1700
	Name of Person Area Code Daytime Telephone Number
Enclosed i	s a check for the following amount:
	S130.00 Filing Fee & S160.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) S160.00 Filing Fee. Certified Copy (additional copy is enclosed)
	Mailing AddressStreet AddressNew Filing SectionNew Filing SectionDivision of CorporationsDivision of CorporationsP.O. Box 6327Clifton BuildingTallahassee, FL 323142661 Executive Center CircleTallahassee, FL 32301

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

in the words "Limited	l Liability Company, "	L.L.C.," or "LLC.")	
dress of the principal	office of the Limited I	.iability Company is:	
1 Office Address:		Mailing Address:	
e_	901 B	tridgewood Place	
3434			
tive Florida registration	on.)	or man designate an more for	ual or
ddress of the registere Jennifer E. Zakin, E.	on.) d agent are:	and designate in andividu	19 JUN SEULE TALLAI
ddress of the registere	on.) d agent are:		19 JUN SEULE TALLAI
ddress of the registere Jennifer E. Zakin, E.	on.) d agent are: sq. Name		19 JUN 13 SELLATIONS
ddress of the registration of the registere dennifer E. Zakin, E. 225 N.E. Mizner Bo	on.) d agent are: sq. Name		19 JUN 13 SELLATIONS
ddress of the registration of the registere dennifer E. Zakin, E. 225 N.E. Mizner Bo	on.) d agent are: sq. Name ulevard, Suite 440		19 JUN SEULE TALLAI
	1 Office Address: 2 3434 at. Registered Office rannot serve as its ow	1 Office Address: 2 901 B 3434 Boca at. Registered Office, & Registered Agent sannot serve as its own Registered Agent. Y	901 Bridgewood Place

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: "AMBR" = Authorized Member "MGR" = Manager MGR Irving M. Paltrowitz 901 Bridgewood Place Boca Raton, Florida 33434 (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 regresentative of a member. This document is executed in accordance with section 605,0203 (1) (b). Florida Statutes.

Filing Fees:

I am aware that any false information submitted in a document to the Department of State

Typed or printed name of signee

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

constitutes a third degree felony as provided for in \$.817,155, F.S.

\$ 30.00 Certified Copy (Optional)

S 5.00 Certificate of Status (Optional)

Irving M. Paltrowitz