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To:

Division of Corporations

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From:

Account Name : BELOFF LAW, P.A.
Account Number : I20080000060
Phone : (305)673-1101

Fax Number : (305)673-5505

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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SHERRY (a) BELOFF LAW. com

FLORIDA LIMITED LIABILITY CO. 2620 S. US 1 LLC

Certificate of Status	1
Certified Copy	1
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Estimated Charge	\$160.00

RH-0023-65

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COVER LETTER (RH-0023-65)

TO:

REGISTRATION SECTION DIVISION OF CORPORATION

SUBJECT:

NEW FILING

The enclosed Articles of Organization and Fees(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jonathan D. Beloff, Esq. 1691 Michigan Avenue Suite 250 Miami Beach, Florida 33139 Telephone: 305-673-1101

Email Address:

sherry@belofflaw.com

\$160.00 Filing Fee Certificate Status & Certified Copy

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ARTICLES OF ORGANIZATION FOR 2620 S. US 1 LLC a Florida limited liability company

The undersigned, desiring to form a limited liability company for the purposes set forth herein and in conformance with the Florida Limited Liability Company Act, does hereby establish the following:

ARTICLE I- NAME:

The name of the limited liability company is: 2620 S. US 1 LLC

ARTICLE II- ADDRESS:

The address of its principal place of business, as well as the mailing address for this limited liability company is: 2121 NW 2ND AVE., SUITE 206, MIAMI, FL 33127

ARTICLES III- REGISTERED AGENT, REGISTERED OFFICE & REGISTERED AGENT'S SIGNATURE

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

STEVEN M. RHODES, 2121 NW 2ND AVE., SUITE 206, MIAMI, FL 33127

Having been named as registered agent and to accept service of process for the above state 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.

STEVEN M. RHODES, Registered Agent

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ARTICLE IV

The name and address of each person authorized to manage and control the Limited Liability Company:

TITLE:

NAME AND ADDRESS:

MEMBER/MANAGER

170 NE 40 STREET, INC. 2121 NW 2ND AVE., SUITE 206 MIAMI, FL 33127

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ARTICLE- VI- Other provisions, if any.

REQUIRED SIGNATURE:

170 NE 40 STREET, INC., a Florida corporation

Steven M. Rhodes, President

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(In accordance with Section 603.0203 (1)(b), Florida Statuts, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true. 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 \$817.155,F.S.)