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Division of Corporations

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From:

Account Name : HUBCO

Account Number : 104662003400 : (516)935-3940 Phone

Fax Number

: (516)935-3088

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

Email Address: CSAUL@LVL37.COM

FLORIDA LIMITED LIABILITY CO.

Ivl37 LLC

Certificate of Status	1
Certified Copy	0
Page Count	03
Estimated Charge	\$130.00

H19000352852 3

ARTICLES OF ORGANIZATION FOR FLORIDA L	IMITED LIABILITY COMPANY
ARTICLE 1 - Name: The name of the Limited Liability Company is:	
Ivi37 LLC	
(Must end with the words "Limited Liability C	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 Addres	i <u>s:</u>
11831 NW 5TH COURT 1183	1 NW 5TH COURT
PLANTATION, FLORIDA 33325 PLAN	ITATION, FLORIDA 33325
(The Limited Liability Company cannot serve as its own Registered another business entity with an active Florida registration.) The name and the Florida street address of the registered agent are:	
CHRISTOPHER SAUL	
Name	
11831 NW 5TH COURT	
Florida street address (P.O. Box NOT acc	eptable)
PLANTATION FL.	33325
City	Zip
Having been named as registered agent and to accept service of pro- the place designated in this certificate. I hereby accept the appoi capacity. I further agree to comply with the provisions of all statu- of my duties, and I am familiar with and accept the obligations of Chapter 60% F.	intment as registered agent and agree to act in this tes relating to the proper and complete performance f my position as registered agent as provided for in

Registered Agent's Signature (REQUIRED)

CHRISTOPHER SAUL

(CONTINUED)

Page Lof2

H19000352852 3

Title:	Name and Address:
"AMBR" = Authorized Member	
"MGR" = Manager MGR	CHRISTOPHER SAUL
	11831 NW 5TH COURT
	PLANTATION, FL 33325
(Use attachment if necessary)	
LE V: Effective date, if other than the date of fective date is listed, the date must be spec-	of filing:
LE V: Effective date, if other than the date of fective date is listed, the date must be spece of filing.) LE VI: Other provisions, if any.	
LE V: Effective date, if other than the date of fective date is listed, the date must be spect of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE:	rific and cannot be more than five business days prior to or 9
LE V: Effective date, if other than the date of fective date is listed, the date must be spect of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a men	rific and cannot be more than five business days prior to or 9
LE V: Effective date, if other than the date of fective date is listed, the date must be spect of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a ment (In accordance with section 6)	tific and cannot be more than five business days prior to or 9 There or an authorized representative of a member. 105.0203 (1) (b), Florida Statutes, the execution of this document
LE V: Effective date, if other than the date of fective date is listed, the date must be spectof filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a ment (In accordance with section 60 constitutes an affirmation unit	tific and cannot be more than five business days prior to or 9 there or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true.
LE V: Effective date, if other than the date of fective date is listed, the date must be spect of filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a ment (In accordance with section 60 constitutes an affirmation unit am aware that any false info	tific and cannot be more than five business days prior to or 9 there or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true, formation submitted in a document to the Department of State
LE V: Effective date, if other than the date of fective date is listed, the date must be spectof filing.) LE VI: Other provisions, if any. REQUIRED SIGNATURE: Signature of a ment (In accordance with section 60 constitutes an affirmation unit am aware that any false info	tific and cannot be more than five business days prior to or 9 above or an authorized representative of a member. 05.0203 (1) (b), Florida Statutes, the execution of this document der the penalties of perjury that the facts stated herein are true.

Page 2 of 2