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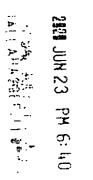
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COVER LETTER

	Ciling Section On of Corporations		
K SUBJECT:	BT 300.10A, LLC		
30B3E1	Name of Lin	nited Liability Company	
The enclosed A	rticles of Organization and fee(s) are	e submitted for filing.	
Please return al	l correspondence concerning this ma	tter to the following:	
Jen	nifer E. Zakin, Esq.		
		Name of Person	
Rec	dgrave & Rosenthal LLP		
		Firm/Company	
225	N.E. Mizner Boulevard, Suite 440		
		Address	
Вос	ca Raton, Florida 33432		
izaki	Ci n@redgraveandrosenthal.com	ty/State and Zip Code	
<u>,</u>		for future annual report notification)	
For further inform	nation concerning this matter, please	call:	
Jenn	nifer E. Zakin, Esq. 56		
	Name of Person Ar	ea Code Daytime Telephone Numb	er
Enclosed is a ch	leck for the following amount:		
≣\$125.00 Filin	-	Certified Copy Cert (additional copy is enclosed) Cert	160.00 Filing Fee, tificate of Status & ified Copy ional copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite Tallahassee, Fl. 32303	810

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

The name of the Limited Liability Company is:	
KBT 300.10A, LLC	
(Must contain the words "Limited Liability	y 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:
2 Bellview Terr	2 Bellview Terr
Princeton, New Jersey 08540	Princeton, New Jersev 08540
ARTICLE III - Registered Agent, Registered Office, & Registered Liability Company cannot serve as its own Register another business entity with an active Florida registration.)	
The name and the Florida street address of the registered agent a	are:
Jennifer E. Zakin, Esq.	
Name	
225 N.E. Mizner Boulevard.	
Florida street address (P.O.	Box <u>NOT</u> acceptable)

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 posting of registered agent as provided for in Chapter 605, F.S..

Boca Raton

City

FL

State

Registered Agent's Signature (REQUIRED)

33432 Zip

(CONTINUED)

@ JUN 23 PH 6:1

FILEU

ARTICLE IV-

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

<u>itle:</u> AMBR" = Aut	thorized Member			
MGR" = Man				
	age:	Lauren B. Eder		
MGR		Lauren B. Eder	 -	
		2 Bellview Terr. Princeton, New Jersey 08540		
				_
				_
				
				_
				-
V: Effective	isted, the date must b	date of filing:	siness days prior to or	
EV: Effective ctive date is liftling.) the date insertment's effective	date, if other than the isted, the date must be don't this block does be date on the Department ovisions, if any.	not meet the applicable statutory filing requirement of State's records.	rements, this date will	not be
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