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Special Instructions to	Filing Officer:	

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COVER LETTER

TO:	New Filing Section Division of Corporations				
SUBJE	Bay Street Realty LLC	;			
SUBJE		Name of Limit	ed Liability Company		
The end	closed Articles of Organization	on and fee(s) are s	submitted for filing.		
Please	eturn all correspondence cor	cerning this matte	er to the following:		
	Abigail Cotler, Esq.				
			Name of Person		
	Almod Diamonds Ltd.				
			Firm/Company		
	12 East 49th Street 39th	Fl.			
			Address		
	New York, NY 10017				
		-	//State and Zip Code		
	acotler@diamondsintern		or future annual report notific	ation)	
For furth	er information concerning th	•		,	
	Abigail Cotler	646 at (644-7271		
	Name of Person	Are	a Code Daytime Telepho	one Number	
Enclose	ed is a check for the following	g amount:			
□\$125		0 Filing Fee & te of Status	□\$155.00 Filing Fee & Certified Copy (additional copy is enclosed)	#\$160.00 Fili Certificate of S Certified Copy (additional copy	Status &
	Mailing Address New Filing Section Division of Corpo P.O. Box 6327 Tallahassee, FL 3	rations	Street Address New Filing Section The Centre of Talla 2415 N. Monroe St Tallahassee, FL 32	nhassee reet, Suite 810	PH 3: 24

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

Bay Street Realty L		L' L'III C	ar I C n - uI I C n	
(Must cor	natin the words "Limited	Liability Company,	"L.L.C.," or "LLC.")	
ARTICLE 11 - Address: The mailing address and street	address of the principal o	ffice of the Limited	Liability Company is:	
<u>Princi</u>	pal Office Address:		Mailing Address:	
2305 NW 107th Av	2305 NW 107th Avenue Suite 1A15		2305 NW 107th Avenue Suite 1A15	
Doral, FL 33172		Don	Doral, FL 33172	
ARTICLE III - Registered As (The Limited Liability Companianother business entity with an	y cannot serve as its own	Registered Agent.	You must designate an individual or	
(The Limited Liability Company	y cannot serve as its own active Florida registration address of the registered Corporation Service	Registered Agent. on.) I agent are:		
(The Limited Liability Comparanother business entity with an	y cannot serve as its own active Florida registration address of the registered Corporation Service	Registered Agent. on.) I agent are: Company Name	You must designate an individual or	
(The Limited Liability Comparanother business entity with an	y cannot serve as its own active Florida registration address of the registered Corporation Service	Registered Agent. on.) I agent are: Company Name	You must designate an individual or	
(The Limited Liability Comparanother business entity with an	y cannot serve as its own active Florida registration address of the registered Corporation Service	Registered Agent. on.) I agent are: Company Name	You must designate an individual or	
(The Limited Liability Companianother business entity with an	y cannot serve as its own active Florida registration to address of the registered Corporation Service 1201 Hays Street Florida street addres	Registered Agent. on.) d agent are: Company Name s (P.O. Box NOT a	You must designate an individual or	

(CONTINUED)

Registered Agent's Signature (REQUIRED)

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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:	
"AMBR" = Authorized Member "MGR" = Manager		
AMBR (45%)	Albert Gad 9601 Collins Avenue, Apt. 409 Bal Harbour, FL 33154	-
AMBR (45%)	Morris Gad 9705 Collins Ave, Unit 1201 Bal Harbour, FL 33154	- - -
AMBR (10%)	Donna Gad-Hecht 15 Hickory Dr. Great Neck, NY 11021	- - -
·		<u>-</u> -
(Use attachment if necessary)		
(If an effective date is listed, the date mus the date of filing.)	the date of filing: (OPTIONAL) t be specific and cannot be more than five business days prior to or 90 es not meet the applicable statutory filing requirements, this date will no rument of State's records.	
ARTICLE VI: Other provisions, if any.	I.D. Commanda II. Commanda Gilleria	
Albert Gad - 45%; Morris Gad - 45%; Dor	ol Bay Street Realty LLC in the following percentages: una Gad-Hecht - 10%	
REQUIRED SIGNATURE:	albert Sul	
This document is I am aware that a	of a member or an authorized representative of a member. sexecuted in accordance with section 605.0203 (1) (b), Florida Statutes. ny false information submitted in a document to the Department of State It degree felony as provided for in s.817.155, F.S.	
	Albert Gad Typed or printed name of signee	71
	Typed or printed name of signee)020 K

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)

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