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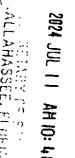
(Requestor's Name)
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SPECIAL INSTRUCTIONS:

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(850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

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## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

	JBL Rid	lge Plaza NY, l	LLC
(Must cont	ain the words "Limited	Liability Compan	ıy, "L.L.C.," or "LLC.")
RTICLE II - Address: he mailing address and street a	ddress of the principal o	office of the Limit	ed Liability Company is:
<u>Princip</u>	al Office Address:		Mailing Address:
2028 Harrison Street, S	Suite 202	20	028 Harrison Street, Suite 202
RTICLE III - Registered Age the Limited Liability Company other business entity with an a	cannot serve as its own	& Registered Agen	gent's Signature: it. You must designate an individual or
RTICLE III - Registered Age	cannot serve as its own active Florida registration address of the registered	& Registered Agen on.)	gent's Signature: at. You must designate an individual or
RTICLE III - Registered Age he Limited Liability Company oother business entity with an a	cannot serve as its own active Florida registration	& Registered Agen on.)	gent's Signature: at. You must designate an individual or
RTICLE III - Registered Age he Limited Liability Company oother business entity with an a	cannot serve as its own active Florida registration address of the registered	& Registered Agenon.) Lagent are:  ot. LLC Name	gent's Signature:
RTICLE III - Registered Age he Limited Liability Company oother business entity with an a	cannot serve as its own active Florida registration address of the registered JBL Asset Managemen	& Registered Agen on.) Lagent are: at. LLC Name	gent's Signature:  a. You must designate an individual or
RTICLE III - Registered Age he Limited Liability Company oother business entity with an a	cannot serve as its own active Florida registratic address of the registered JBL Asset Management 2028 Harrison Street, S	& Registered Agen on.) Lagent are: at. LLC Name	gent's Signature:  a. You must designate an individual or

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

(CONTINUED)

Registered Agent's Signature (REQUIRED)

## ARTICLE IV-

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

MGR	Local VIII and Activities of the Control College 2005
SOIR	Jacob Khotoveli - 2028 Harrison Street, Suite 202 Hollywood, Fl. 33020
	<del></del>
<u> </u>	
	~
	- J.
	>
(Use attachment if necessary)	
ŕ	days of fillings (OPTIONS)
CLE V: Effective date, if other than the	date of filing: (OPTIONAL)
CLE V: Effective date, if other than the effective date is listed, the date must bate of filing.)	date of filing: (OPTIONAL) especific and cannot be more than five business days prior to or 90 days a
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CLE V: Effective date, if other than the effective date is listed, the date must be the of filing.)  If the date inserted in this block does recument's effective date on the Department of the	date of filing:

Typed or printed name of signee

Filing Fees:
\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of States (Copy)

\$ 5.00 Certificate of Status (Optional)