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Name:	21 Hollywood E	Borrower, LLC	3	
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Certified Copy of Arts & Amend: Plain Copy: Certificate of Good Standing: Certified Copy of				
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Thank you!

COVER LETTER

	ew Filing Section ivision of Corporations		
SUBJECT	21 Hollywood Borrower, LLC		
SUBJECT		Limited Liability Company	_
The enclos	sed Articles of Organization and fee(s	s) are submitted for filing.	
Please retu	irn all correspondence concerning thi	s matter to the following:	~~)
	Bracha Pollack		7
		Name of Person	
	Greenberg Traurig, LLP		
		Firm/Company	
	401 East Las Olas Boulevard, Suite	2000	-4
		Address	·····
	Fort Lauderdale, FL 33301		
	thestarlifegroup@gmail.com	City/State and Zip Code	
	E-mail address: (to be t	ised for future annual report notification)	<u>_</u>
For further i	nformation concerning this matter, p	lease call:	
	Lori Grant-Koehler	602 445-8342	
	Name of Person	Area Code Daytime Telephone Number	
Enclosed i	s a check for the following amount:		
□\$125.00	Filing Fee S130.00 Filing Fe Certificate of Status	Certifica Copy Certifica (additional copy is enclosed) Certified	00 Filing Fee, te of Status & Copy copy is enclosed)
	Mailing Address New Filing Section Division of Corporations P.O. Box 6327	Street Address New Filing Section Division The Centre of Tallahassee 2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE 1 - Name:	
The name of the Limited Liability Company is:	
21 Hollywood Borrower, LLC	
(Must contain the words "Limited Liabil	lity 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:
3080 SW 44th Court	3080 SW 44th Court
Fort Lauderdale, FL 33312	Fort Lauderdale, FL 33312
ARTICLE III - Registered Agent, Registered Office, & Re The Limited Liability Company cannot serve as its own Region another business entity with an active Florida registration.)	
The name and the Florida street address of the registered agen	nt are:
C T Corporation System	
Nar	ne
1200 South Pine Island Ro	oad

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..

Florida street address (P.O. Box NOT acceptable)

Plantation

City

/s/ David Westcott, David Westcott- Asst. Secty.

Registered Agent's Signature (REQUIRED)

(CONTINUED)

ARTICLE IV-

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

"MGR" = Manager	
MGR	Gevorg Shahbazyan
	3080 SW 44th Court
	Fort Lauderdale, FL 33312
	· · · · · · · · · · · · · · · · · · ·
	
(Live attachment if management	
EV: Effective date, if other than the date of	filing: (OPTIONAL) fic and cannot be more than five business days prior to or
ective date is listed, the date must be speciful of filing.) the date inserted in this block does not meement's effective date on the Department of SEVI: Other provisions, if any.	fic and cannot be more than five business days prior to or set the applicable statutory filing requirements, this date will r
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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)