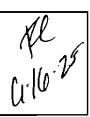
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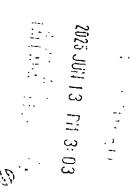
Office Use Only



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# CORPORATE ACCESS,

## When you need ACCESS to the world

INC.

236 East 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

### WALK IN

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#### $ARTICLES\,OF\,ORGANIZATION\,FOR\,FLORIDA\,LIMITED\,LIABILITY\,COMPANY$

ARTICLE I - Name: The name of the Limited Liability	y Company is:				
7233 PROMENADE (Must conta		Liability Con	npany, "L.L.C.," or "LLC.")	<del></del>	
ARTICLE II - Address: The mailing address and street ac	ddress of the principal o	ffice of the L	imited Liability Company is:		
Principal Office Address:			Mailing Addre	<u>'ss</u> :	
187-51 SOUTHEAST CROSSWINDS LANE JUPITER, FL 33478			187-51 SOUTHEAST CROSSWINDS LAN JUPITER, FL 33478		
ARTICLE III - Registered Age (The Limited Liability Company another business entity with an a The name and the Florida street a	cannot serve as its own etive Florida registratio address of the registered	Registered / n.) agent are:		ividual or	
	MICHAEL J TANNI	•		,,, <u>e</u>	
		Name			
187-51 SOUTHEAST CROSSWINDS LANE					
Florida street address (P.O. Box NOT acceptable)					
	JUPITER	FL	33478		
	City	State	Zip		
Having been named as registered a place designated in this certificate, further agree to comply with the prount familiar with and accept the ob-	I hereby accept the appo ovisions of all statutes re ligations of my position of /S/MICHAEL J	ointment as relating to the us registered	egistered agent and agree to act in proper and complete performance agent as provided for in Chapter (	this capacity. I of my duties, and I	
		(CONTIN	UED)		

ARTICLE IV-The name and address of each person authorized to manage and control the Limited Liability Company: Name and Address: Title: "AMBR" = Authorized Member "MGR" = Manager MICHAEL J TANNENHOLTZ AMBR 187-51 SOUTHEAST CROSSWINDS LANE JUPITER, FL 33478 (Use attachment if necessary) ARTICLE V: Effective date, if other than the date of filing: \_\_\_\_\_. (OPTIONAL) (If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. ARTICLE VI: Other provisions, if any. REQUIRED SIGNATURE:

#### /S/ MICHAEL J TANNENHOLTZ

Signature of a member or an authorized representative of a member.

This document is executed in accordance with section 605.0203 (1) (b), Florida Statutes. I am aware that any false information submitted in a document to the Department of State constitutes a third degree felony as provided for in s.817.155, F.S.

#### MICHAEL J TANNENHOLTZ

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 Status (Optional)