

1201 HAYS STREET
TALLAHASSEE, FL 32301
TEL: 904-222-0390 FAX: 904-222-0391

800-342-8086



ACCOUNT NO. : 0721000000

REFERENCE : *Patricia P. 82724A*

AUTHORIZATION :

COST LIMIT : \$ 337.50

ORDER DATE : June 29, 1995

ORDER TIME : 3:30 PM

ORDER NO. : 629365

CUSTOMER NO: 82724A

600001527726

CUSTOMER: J. Thomas Conroy, Esq.
MORRISON & CONROY

975 6th Avenue, South

Naples, FL 33940

DOMESTIC FILING

NAME: NINTH AVENUE, L.C.

☐ ARTICLES OF INCORPORATION
☐ CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

☐ XXXX CERTIFIED COPY
☐ PLAIN STAMPED COPY
☐ CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Karen B. Rozar

EXAMINER'S INITIALS:

FILED
95 JUN 29 PM 2:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

*We need today
file date*

*We'll send
the original
Tomorrow*

*Thank
Karen*

ARTICLES OF ORGANIZATION OF
NINTH AVENUE, L.C.

FILED
95 JUN 29 PM 2:52
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

ARTICLE I

The name of this Limited Liability Company shall be:

Ninth Avenue, L.C.

ARTICLE II

This Limited Liability Company shall exist for a period of thirty years from the date of filing with the Department of State.

ARTICLE III

The Limited Liability Company is created for the purpose of transacting any lawful business or purpose, and any other related business as may be agreed on by the members.

ARTICLE IV

The mailing address and street address and place of business of this Limited Liability Company shall be 5454 Wisconsin Avenue, Suite 1015, Chevy Chase, Md, and such other place or places as the members, from time to time, may determine.

The initial Registered Agent of the Limited Liability Company shall be Gerald I. Goldberg, 1790 Gulfshore Blvd. South, Naples, FL 33940.

ARTICLE V

The initial amount of capital contributions (including cash and a description of the agreed value of property) is \$400,500.00, which will be contributed by the members.

ARTICLE VI

The Limited Liability Company will be managed by its member Gerald I. Goldberg. The Managing Member's name and address is:

Gerald I. Goldberg
1790 Gulfshore Boulevard South
Naples, Florida 33940

ARTICLE VII

The operation of the Limited Liability Company shall be governed by that certain Ninth Avenue Limited Liability Company Agreement Member's Agreement dated the ____ day of April 29, 1995.

IN WITNESS WHEREOF, the parties hereto have executed these Articles of Organization, this 29th day of June, 1995.

Witnesses:

[Signature]
Witness #1
J. Thomas Conner, III
(Print Name)
[Signature]
Witness #2
DYNNA MARIE BRITTON
(Print Name)

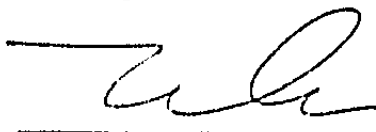
[Signature]
Gerald I. Goldberg

STATE OF FLORIDA

COUNTY OF COLLIER

The foregoing instrument was acknowledged before me this 29th day of June, 1995 by Gerald I. Goldberg, who is personally known to me or has produced _____ as identification. NOTE: If a type of identification is not inserted in the

blank provided, then the person executing this instrument was personally known to me.

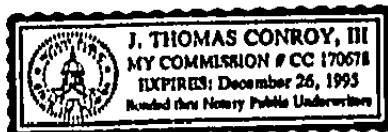


Notary Public

(Print/type Name)

(Commission Number)

(Commission Expires)



Corp/Ninth.Art

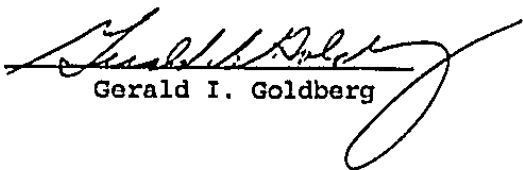
AFFIDAVT OF MEMBERSHIP AND CONTRIBUTIONS

STATE OF FLORIDA

COUNTY OF COLLIER

BEFORE ME, the undersigned authority, personally appeared Gerald I. Goldberg, a member or authorized representative of a member of Ninth Avenue, L.C., who deposes and says:

1. The above named Limited Liability Company has at least two members;
2. The total amount of cash contributed by the members is \$400,500.00;
3. If any, the agreed value of property other than cash contributed by members is \$ -0-; and
4. The total amount of cash or property anticipated to be contributed by members is \$400,500.00. This total includes amounts from #2. and #3. above.


Gerald I. Goldberg

STATE OF FLORIDA

COUNTY OF COLLIER

The foregoing instrument was acknowledged before me this 29th day of June, 1995, by Gerald I. Goldberg who is personally know to me, or has produced _____ as identification. NOTE: If a type of identification is not inserted in the blank provided, then the person executing this instrument was personally known to me.

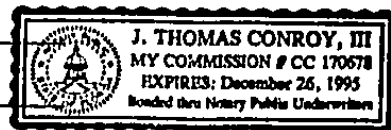


Notary Public

(Print/type Name)

(Commission Number)

(Commission Expires)



CERTIFICATION OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE


FILED
95 JUN 29 PM 2:52
SECRETARY OF STATE
TALLAHASSEE, FL 32399

PURSUANT TO THE PROVISIONS OF SECTION 608415 or 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is: Ninth Avenue L.C.
2. The name and address of the Registered Agent and Office is:

Gerald I. Goldberg
1790 Gulfshore Blvd. South, Naples, FL 33940

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.


Gerald I. Goldberg

Date: June 29, 1995

**ACCEPTANCE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

I, the undersigned person, 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 statement, 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.


Gerald I. Goldberg

Date: June 29, 1995

FILE NOW: Fee after May 1, will be \$263.75

**APPROVED
AND
FILED**

96 APR -2 PM 2:49

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

**LIMITED LIABILITY COMPANY
ANNUAL REPORT
1996**



**FLORIDA DEPARTMENT OF STATE
Sandra B. Motham
Secretary of State
DIVISION OF CORPORATIONS**

**FILING FEE
\$ 238.75**

Annual Report \$100.00 + \$138.75 Corporation Supplemental Fee

Make Check Payable To: FLORIDA DEPARTMENT OF STATE

**1. Name and Mailing Address
of Limited Liability Company**

DOCUMENT #L95000000505

**NINTH AVENUE, L.C.
5454 WISCONSIN AVENUE
SUITE 1015
CHEVY CHASE MD**

1a. Principal Place of Business Address

**5454 WISCONSIN AVENUE
SUITE 1015
CHEVY CHASE MD**

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2a

2. Principal Place of Business

SAME

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

3. Date Organized or Qualified

06/29/1995

3a. State Formation

FL

4. FEI Number

65-0554142

☐ **Applied For**

☐ **Not Applicable**

5. Date of Last Report

6. Certificate of Status Desired

☐ **Additional Fee Required**

7. Name and Address of Current Registered Agent

**GOLDBERG, GERALD I
1790 GULF SHORE BLVD., SOUTH
NAPLES FL 33940**

8. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

Suite, Apt. #, etc.

City

200001770312

-04/05/96--01020--019

******238.75 ****238.75**

FL

Zip Code

9. Pursuant to the provisions of Sections 608.418 and 608.508, Florida Statutes, the above-named limited liability company submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by affirmative vote of a majority of the members. Thereby accept the appointment as registered agent, and accept the obligations

SIGNATURE

(Registered Agent Accepting Appointment) (F.S. 608.418) (Registered Agent's signature required when reappointing)

DATE

10. Title

Managing Members/Managers

Business Street Address

City, State and Zip Code

MGRM

GOLDBERG, GERALD I

1790 GULF SHORE BLVD., SOUTH

NAPLES FL 33940

11. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), Florida Statutes. I further certify that the information indicated on this annual report is true and accurate and that my signature shall have the same legal effect as if made under oath, that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 608, Florida Statutes, and that my name appears in Block 10, or on an attachment with an address.

SIGNATURE:

[Signature]

MGRM

3/8/96

301-657-8371