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REFERENCE : 060187 4302173

**AUTHORIZATION:** 

ORDER DATE: December 10, 1998

ORDER TIME : 10:07 AM

ORDER NO. : 060187-005

CUSTOMER NO: 4302173

CUSTOMER: Steven Lummer, Legal Asst

SWIDLER BERLIN SHEREFF SWIDLER BERLIN SHEREFF

919 Third Avenue

New York, NY 10022

DOMESTIC FILING

NAME:

VGIP ASSOCIATES, LLC

EXAMINER'S INITIALS:

EFFECTIVE DATE:

XX ARTICLES OF INCORPORATION CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

PLAIN STAMPED COPY

CERTIFICATE OF GOOD STANDING

Christopher Smith CONTACT PERSON:

> Name Availability

Document

Examiner

Updater

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Acknowledgemen

W. P. Verityer

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FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

December 15, 1998

CSC

SUBJECT: VGIP ASSOCIATES, LLC

Ref. Number: W98000027964



We have received your document for VGIP ASSOCIATES, LLC and your check(s) totaling \$285.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

The document must have original signatures.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6967.

Michelle Hodges Document Specialist

Letter Number: 198A00058908

## . ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

#### ARTICLE I - Name:

The name of the Limited Liability Company is:

VEIP Associates, LLC

#### ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is:

40 Sevell Realty Partners, 2295 Corporate Boulevard NW 125, Boca Raton, Florida 33431

#### **ARTICLE III - Duration:**

The period of duration for the Limited Liability Company shall be:

50 years

### ARTICLE IV - Management: (Check the appropriate box and complete the statement)

☐ The Limited Liability Company is to be managed by a manager or managers and the name(s) and address(es) of such manager(s) who is/are to serve as manager(s) is/are:

The Limited Liability Company is to be managed by the members and the name(s) and address(es) of the managing member(s) is/arc:

Barry M. Davis and Peter Gamar Sun Management Corporation 301 Fields Lane

branster, N.Y. 10509

ARTICLE V - Admission of Additional Members:

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

Unlimited

ARTICLE VI - Members Rights to Continue Business:

The right, if given, of the remaining members of the limited liability company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the limited liability company shall be:

unlimited

#### ARTICLE VII - Affidavit of Membership and Contributions

| The undersigned member or authorized representative of a member of  | certifies:          |
|---|---------------------|
| 1) the above named limited liability company has at least one member;<br>2) the total amount of eash contributed by the member(s) is  | \$ <u>/60,000</u> ; |
| 3) if any, the agreed value of property other than cash contributed by member(s) is (A description of the property is attached and made a part hereto.); and                  | \$ <u>607,000</u> ; |
| 4) the total amount of cash and property contributed and anticipated to be contributed by member(s) is  | s <u>768,000</u>    |
| Signature of a member or an authorized representative of a men  | nber.               |
| (In accordance with section 608.408(3), Florida Statutes, the execution affidavit constitutes an affirmation under the penalties of perjury that the stated herein are true.) | n of this           |
| MICHAEL SUAPIRO   |                     |
| Typed or printed name of stonee   | =                   |

Filing Fee: \$250,00 for Articles and Affidavit

# CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 or 608.507, FLORIDA STATUES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

11010

| 1. | The name of the limited liability company is: VGIP HSSO Uates, I     |
|----|--|
| 2. | The name and the Florida street address of the registered agent are: |
|    | Corporation Service Company NAME                                     |
|    | 1201 Hays Street  Florida street address (P. O. Box NOT ACCEPTABLE)  |
|    | Tallahassee, FL 32301 Crry. State and Zip                            |

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. If 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.

Karen B. Rozar, Asst. Sec. Corporation Service Company

Filing Fcc: \$35 as for Designation of Registered Agent

#### Schedule A

Lots 1 and 4, Block 17, FIRST REPLAT IN PORT ST. LUCIE INDUSTRIAL PARK - UNIT ONE, according to the Plat thereof, recorded in Plat Book 23, Pages 6 and 6A through D, Public Records of St. Lucie County, Florida.

File No: FL98-1519