99000005517



ACCOUNT NO. :

072100000032

REFERENCE :

361222

AUTHORIZATION:

COST LIMIT :

\$ 285.00

ORDER DATE: September 1, 1999

ORDER TIME : 11:39 AM

ORDER NO. : 361222-005

900002977049--3

CUSTOMER NO:

4352312

CUSTOMER:

Ms. Moira K. Kerr

DEVORSETZ STINZIANO GILBERTI & DEVORSETZ STINZIANO GILBERTI &

555 East Genesee Street

Syracuse, NY 13202-2159

DOMESTIC FILING

NAME:

WOODBINE JAX COMPANY, L.C.

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

CONTACT PERSON: Jamela Abaied

Name Availability Document ____ Examiner

Updater

Updater Verifyer

Acknowledgement

W. P. Verifyer

EXAMINER'S INITIALS:

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Woodbine JAX Company, L.C.

ARTICLE II - Address:

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

c/o Woodbine Group, Inc 1030 East Genesee Street Syracuse, New York 13202

ARTICLE III - Duration:

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

Perpetual

ARTICLE IV - Management (check and complete the appropriate statement)

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

Norman Swanson 1030 East Genesee Street Syracuse, New York 13202

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

ARTICLE V - Effective Date

Pursuant to Section 608.409(1), the Limited Liability Company's existence shall begin on August

F:\corp\jpb\document\florida.llc\fla.llc

REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

The name of the limited liability compan	ny is: <u>Woodbine J</u>	AX Company, L.C.
	更.	
The name and address of the registered	agent and office is	:
Ainsley Superior Warehouse - Florida, (Name)	Inc.	
1063 Canada Drive, Emson Internation (P.O. Box or Mail Drop Box NOT Ac	nal Industrial Park cceptable)	<u> </u>
Jacksonville, FL 32218 (City/State/Zip)	· · · · · · · · · · · · · · · · · · ·	
Taving been named as registered agent of imited liability company at the place descriptions as registered agent and agraph with the provisions of all statutes relating duties, and I am familiar with and accept	signated in this cer ree to act in this ca gates the proper an	pacity. I further agree to comply decomplete performance of my
By:	- The state of th	(Date)

Filing Fee: \$35 Designation of Registered Agent

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of ___ Woodbine JAX Company, L.C. deposes and says: the above named limited liability company has at least one member. I) 2) the total amount of cash contributed by the member(s) is \$ 1,000 3) if any, the agreed value of property other than cash contributed by member(s) is \$ -0a description of the property is attached and made a part hereto. 4) the amount of cash or property anticipated to be contributed by member(s) is \$ -0-5) the total amount of 2, 3 and 4 is \$1,000

Signature of a member or authorized representative of a member, (in accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of penjury that the facts stated herein are true.)

Lynn H. Smith

Filing Fee: \$250.00 for Articles and Affidavit

CERTIFICATE OF DESIGNATION OF