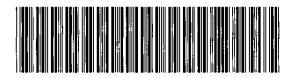
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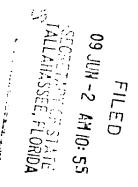
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FILE

APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY FOR AUTHORIZATION TO TRANSACT BUSINESS IN FLORIDA

IN COMPLIANCE WITH SECTION 608.503, FLORIDA STATUTES, THE FOLLOWING IS SUBMITTED TO REGISTER A FOREIGN LIMITED LIABILITY COMPANY TO TRANSACT BUSINESS IN THE STATE OF FLORIDA:

1 Stark	e Development LLC
(N	ame of Foreign Limited Liability Company; must include "Limited Liability Company," "L.L.C.," or "LLC.")
consent o	mavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written f the managers or managing members adopting the alternate name. The alternate name must include "Limited Liability" "L.L.C.," "LLC.")
2. Dela	ware 3
(Jurisdi	ction under the law of which foreign limited liability (FEI number, if applicable) by is organized)
4 05/27	7/2009 Perpetual
	(Date of Organization) (Duration: Year limited liability company will ceuse to exist or "perpetual")
6	
	(Date first transacted business in Florida, if prior to registration.) (See sections 608.501 & 608.502 F.S. to determine penalty liability)
7	17 Circle Way
	Sea Cliff, NY 11579
	(Street Address of Principal Office)
9. The r	ited liability company is a manager-managed company, check here ame and usual business addresses of the managing members or managers are as follows: ord Berger, 17 Circle Way, Sea Cliff, NY 11579
Gleni	1 McDermott, 17 Circle Way, Sea Cliff, NY 11579
he jurisdic ranslation	ed is an original cartificate of existence, no more than 90 days old, duly authenticated by the official having custody of records in tion under the law of which it is organized. (A photocopy is not acceptable. If the certificate is in a foreign language, a of the certificate under oath of the translator must be submitted.) are of business or purposes to be conducted or promoted in Florida: estate investment and development.
	The Army
	Signature of a member or an authorized representative of a member. (In accordance with section 608.408(3), F.S., the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.) Sanford Berger, Managing Member
	Typed or printed name of signee
	h hea or brinted name of signes

CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

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

of the Limited Liability (Company is:			
elopment LLC	<u> </u>			
ilable, the alternate nam	ne to be used in the s	state c	of Florida is:	
and the Florida street add	dress of the register	ed ago	ent and office are:	
	Incorp Services,	Inc.		
	(Name)			
	17888 67th Court	North		
Florida Stree	eet Address (P.O. Box 1	NOT A	CCEPTABLE)	
Loxahatchee	FL		33470	
at the second se	City/State/Z	ip		
ny at the place designates e to act in this capacity. proper and complete perf ny position as registered (Signature) c Wolz, Assistant Sccre	ed in this certificate, I further agree to conformance of my dution agent as provided for the conformance of my dution as provided for the conformance of the conform	I here omply es, and or in C	by accept the appoi with the provisions I I am familiar with Chapter 608, Florid	ntment as registered of all statutes and accept the
	elopment LLC ilable, the alternate name and the Florida street ad the Florida street ad the Loxahatchee Loxahatchee Loxahatchee and the place designate to act in this capacity. For oper and complete per proper and complete per per per per per per per per per pe	Incorp Services, (Name) 17888 67th Court Florida Street Address (P.O. Box for the place designated in this certificate, are to act in this capacity. I further agree to coroper and complete performance of my dutiently position as registered agent as provided for (Signature) (Signature) (Signature) c Wolz, Assistant Secretary	ilable, the alternate name to be used in the state of and the Florida street address of the registered age Incorp Services, Inc. (Name) 17888 67th Court North Florida Street Address (P.O. Box NOT A) Loxabatchee FL City/State/Zip amed as registered agent and to accept service of p my at the place designated in this certificate, I here to act in this capacity. I further agree to comply proper and complete performance of my duties, and my position as registered agent as provided for in Court North (Signature) (Signature) (Signature) C Wolz, Assistant Secretary	ilable, the alternate name to be used in the state of Florida is: Incorp Services, Inc. (Name) 17888 67th Court North Florida Street Address (P.O. Box NOT ACCEPTABLE) Loxahatchee FL City/State/Zip Imed as registered agent and to accept service of process for the above my at the place designated in this certificate, I hereby accept the appoint to act in this capacity. I further agree to comply with the provisions proper, and complete performance of my duties, and I am familiar with my position as registered agent as provided for in Chapter 608, Florida (Signature) (Signature) (Signature) C Wolz, Assistant Secretary

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (optional) \$ 5.00 Certificate of Status (optional)

Delaware

PAGE 1

The First State

I, JEFFREY W. BULLOCK, SECRETARY OF STATE OF THE STATE OF

DELAWARE, DO HEREBY CERTIFY "STARKE DEVELOPMENT LLC" IS DULY

FORMED UNDER THE LAWS OF THE STATE OF DELAWARE AND IS IN GOOD

STANDING AND HAS A LEGAL EXISTENCE SO FAR AS THE RECORDS OF THIS

OFFICE SHOW, AS OF THE TWENTY-SEVENTH DAY OF MAY, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE SAID "STARKE DEVELOPMENT LLC" WAS FORMED ON THE TWENTY-SEVENTH DAY OF MAY, A.D. 2009.

AND I DO HEREBY FURTHER CERTIFY THAT THE ANNUAL TAXES HAVE NOT BEEN ASSESSED TO DATE.

4692030 8300

090538089

AUTHENTYCATION: 7326254

DATE: 05-27-09

You may verify this certificate online at corp.delaware.gov/authver.shtml