Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

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To:

Division of Corporations

Fax Number

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From:

Account Name : EMPIRE CORPORATE KIT COMPANY EFFECTIVE DAY
Account Number : 072450003255
Phone : (305)541-3694

Fax Number

: (305)541-3770

LIMITED LIABILITY COMPANY

LAMBHOLM SOUTH, LLC

* .*	<u> </u>
Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

May 11, 2000

LAMBHOLM SOUTH, LLC



We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on . Please amend your document accordingly.

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 calī (850) 487-6043.

Shawn Logan Document Specialist

FAX Aud. #: H00000019233 Letter Number: 300A00025558

HOOOOOIGABS ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANI

ARTICLE I - Name:

The name of the Limited Liability Company is:

LAMBHOLM SOUTH, L.L.C.

ARTICLE II - Address:

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

11501 N.W. 225-A Reddick, FL 32686

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

The name and the Florida street address of the registered agent are:

JEFFREY M. PERLOW, ESQ.	
Name 20801 Biscayne Boulevard, #505	
Florida street address (P.O. Box NOT acceptable) Aventura, FL 33180	
City, 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. 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 as provided for in Chapter 608, F.S..

Article IV - Management (Check box if applicable.)

The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

Article V - Effective Date

The effective date of this Limited Liability Company is April

(An additional article must be article if her effective date is requested.)

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

(In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

ROY S. LERMAN

FILING FEES:
\$ 100.00 Filing Fee for Articles of Organization
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (OPTIONAL)

5.00 Gertificate of Status (OPTIONAL)

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Typed or printed name of signee