

Division of Corporations

Page 1 of 1

**L01000003806**

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

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H01000026035 5)))

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To: Division of Corporations  
Fax Number : (850)922-4003

From: Account Name : FIELDSTONE LESTER SHEAR & DENBERG  
Account Number : T19990000180  
Phone : (305)357-5775  
Fax Number : (305)357-5776

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 MAR 12 AM 10:41

FILED

AL1

RECEIVED

01 MAR 12 PM 4:17

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**LIMITED LIABILITY COMPANY**

**KINGS WINDGATE ASSOCIATES, L.L.C.**

Certificate of Status	0
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

Electronic Filing Menu

Corporate Filing

Public Access Help

HO1 000026035 5

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

KINGS WINDGATE ASSOCIATES, L.L.C.

ARTICLE II - Address:

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

201 Alhambra Circle, Suite 601  
Coral Gables, FL 33134

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

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

Ronald R. Fieldstone

Name

201 Alhambra Circle, Suite 601

Florida street address (P.O. Box NOT acceptable)

Coral Gables, Florida 33134

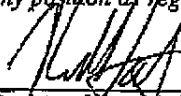
City, State, and Zip

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

01 MAR 12 AM 10:41

FILED

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.



Registered Agent's Signature

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.

(An additional article must be added if an effective date is requested)

Ronald R. Fieldstone  
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.)

Ronald R. Fieldstone, Authorized Agent

Typed or printed name of signee

H01 000026035 5

**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.

- 1. The name of the Limited Liability Company is:  
KINGS WINDGATE ASSOCIATES, L.L.C.
- 2. The name and the Florida street address of the registered agent and office are:

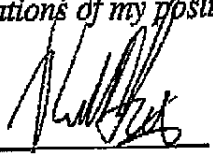
Ronald R. Fieldstone  
Name

201 Alhambra Circle, Suite 601  
Florida street address (P.O. Box NOT acceptable)

Coral Gables, Florida 33134  
City, State, and Zip

FILED  
 01 MAR 12 AM 10:41  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

*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.*



(Signature)