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03 AUG 26 AM 7:32
DIVISION OF CORPORATION

LIMITED LIABILITY COMPANY

coral lakes development llc

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STATE OF FLORIDA
TALLAHASSEE

2002

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY
CORAL LAKES DEVELOPMENT LLC**

ARTICLE I

The name of the limited liability company shall be: **CORAL LAKES DEVELOPMENT
LLC**

ARTICLE II

The principal place of business and mailing address of the corporation shall be:

**13255 SW 135 AVENUE
MIAMI, FL 33187**

ARTICLE III

This limited liability company shall commence its existence immediately upon the filing of the Articles of Organization and shall perpetually thereafter be in existence unless sooner dissolved by and in accordance with Florida law.

ARTICLE IV

The name and address of the initial registered agent is:

**Gilbert A. Contreras
13255 SW 135 AVENUE
MIAMI, FL 33187**

ARTICLE V

The limited liability company is to be managed by a managing member. The managing member of the company shall be Monaco Management Group Inc., a Florida corporation.

The undersigned has executed these Articles of Organization on this 25TH day of August, 2003.



Gilbert A. Contreras, Esq.

03 AUG 25 AM 9:36
FILED
CLERK OF COUNTY OF DADE
STATE OF FLORIDA

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**CERTIFICATE OF DESIGNATION
REGISTERED AGENT/REGISTERED OFFICE**

Pursuant to the provisions of Florida Statutes, the undersigned limited liability company, organized under the laws of the State of Florida, submits the following statement in designating the registered office/registered agent, in the State of Florida.

First that, **CORAL LAKES DEVELOPMENT LLC** desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Organization, has named **Gilbert A. Contreras, Esq.**, whose address is **13255 SW 135 AVENUE MIAMI, FL 33187**, as its agent to accept service of process within this State.

HAVING BEEN NAMED AS REGISTERED AGENT AND TO ACCEPT SERVICE OF PROCESS FOR THE ABOVE-STATED CORPORATION 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.

SIGNATURE _____

Registered Agent

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TALLAHASSEE FLORIDA

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