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To: Division of Corporations
Fax Number : (850)205-0383

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305)634-3694
Fax Number : (305)633-9696

LIMITED LIABILITY COMPANY

CAMELOT LUXURY HOMES, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

RECEIVED
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ARTICLES OF ORGANIZATION

OF

**CAMELOT LUXURY HOMES, LLC,
A FLORIDA LIMITED LIABILITY COMPANY**

The undersigned subscribes to these Articles of Organization hereby for a Limited Liability Company under the Laws of the State of Florida.

ARTICLE ONE

Name

The name of this limited liability company is:

CAMELOT LUXURY HOMES, LLC, a Florida Limited Liability Company

ARTICLE TWO

Nature of business

This limited liability company may engage in any activity permitted under the laws of the United States of America and the laws of the State of Florida.

ARTICLE THREE

Duration

The term of the Company shall begin upon the filing of these Articles with the Florida Secretary of State and shall continue in perpetuity, unless sooner terminated pursuant to these Articles.

ARTICLE FOUR

Place of business and registered agent

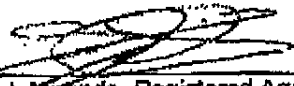
The principal place of business of this limited liability company shall be 410 Leucadendra Dr. Coral Gables, Florida 33158, and such other place or places as the members from time to time may determine. The mailing address shall be the same as the business address.

The initial registered agent of this limited liability company shall be Guillermo J. Miranda whose address is 410 Leucadendra Dr. Coral Gables, Florida 33158

ARTICLE FIVE

Acceptance of registered agent

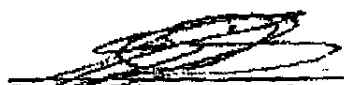
The undersigned, Guillermo J. Miranda, having been named as registered agent for this limited liability company, at the place designated in these articles of organization, hereby agrees to act in the capacity of registered agent, agrees to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and certifies that it is familiar with the obligations of a registered agent.


Guillermo J. Miranda, Registered Agent

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Signature of a member of an authorized
representative of a member

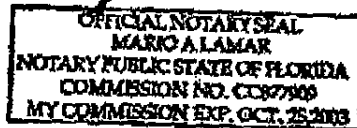
STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)

I HEREBY CERTIFY that the foregoing instrument was acknowledged before me on this day by Guillermo J. Miranda, who is personally known to me or who produced a driver license or _____ as identification.

WITNESS my hand and official seal in the County and State aforesaid on this 22 day of August, 2003.

My Commission Expires


Notary Public



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MIRANDA
3971 SW 8th Street, Suite 305, Miami, Florida 33134

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