

**L04000059224**

Florida Department of State  
Division of Corporations  
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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

RECEIVED

04 AUG 10 PM 1:18

DIVISION OF CORPORATION

FILED  
04 AUG 10 AM 8:58  
TALLAHASSEE, FLORIDA

**LIMITED LIABILITY COMPANY**

**doral palms business park, llc**

Certificate of Status	0
Certified Copy	1
Page Count	04
Estimated Charge	\$155.00

1040000164130

ARTICLES OF ORGANIZATION

FOR

DORAL PALMS BUSINESS PARK, LLC

ARTICLE I. - NAME:

The name of this Limited Liability Company ("Company") shall be:

DORAL PALMS BUSINESS PARK LLC

ARTICLE II. - ADDRESS

The mailing address and street address of the offices of the Company is:  
1800 SW 27 Avenue, Suite 201 Miami Florida 33145.

ARTICLE III. - DURATION

The period of duration for the Company shall be perpetual unless dissolved according to law.

ARTICLE IV. - MANAGEMENT

The Company is to be member managed and the name(s) and address of such manager is:

VF Doral LLC, a Florida Limited Liability Company  
1800 SW 27 Avenue, Suite 201  
Miami Florida 33145

ARTICLE V. - ADMISSION OF ADDITIONAL MEMBERS

The right of the members to admit additional members and the terms and conditions of the admissions shall be: new members may be admitted from time to time and upon such terms and conditions as shall be determined by a unanimous vote of the holders of all of the Membership Interests.

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CLERK OF COURT  
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ARTICLE VI. - MEMBERS RIGHTS TO CONTINUE BUSINESS

The right of the members of the Company to continue the business on the death, retirement, resignation, expulsion, bankruptcy, or dissolution of a member or the occurrence of any other event which terminates the continual membership of a member in the Company shall be determined by a unanimous vote of the remaining holders of all of the Membership Interests to continue to conduct the business of the Company under the Company's name.

  
\_\_\_\_\_  
Signature of a member or an authorized representative of a member

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

**FILED**

04 AUG 10 AM 8:58

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

4040000164136

**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: DORAL PALMS BUSINESS PARK LLC
2. The name and the Florida street address of the registered agent is:

AUGUSTO FONTE

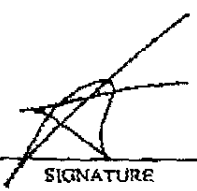
NAME

1800 SW 27 Avenue, Suite 201  
Florida street address (P.O. BOX NOT ACCEPTABLE)

Miami, Florida 33145

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.

  
SIGNATURE

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JUN 10 AM 8:58  
TALLAHASSEE, FLORIDA

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