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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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VALIDATION ONLY

Dunkley + Associates

Requestor's Name

14100 Palmetto Frontage Rd.

Address

Miami Lakes, FL 33016 #201

City

State

ZIP

Phone

CORPORATION(S) NAME

Woodridge Homes, LLC

- Profit
- NonProfit
- Foreign
- Limited Partnership
- Reinstatement
- Certified Copy
- Call When Ready
- Walk In
- Amendment
- Dissolution
- Annual Report
- Reservation
- Photo Copies
- Call If Problem
- Will Wait
- Merger
- Mark
- Other LLC
- Change of Registered Agent
- Certificate Under Seal
- After 4:30
- Mail Out

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Empire Toll Free: 1-800-432-3028

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Woodridge Homes, LLC.

ARTICLE II - Address:

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

Principal Office Address:

180 MADEIRA AVE
CORAL GABLES, FL. 33134

Mailing Address:

180 MALAYKA AVE
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:

LINDSAY DUNKLEY
Name

180 MALAYKA AVE
Florida street address (P.O. Box **NOT** acceptable)

CORAL GABLES FL 33134
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.


Registered Agent's Signature

(CONTINUED)

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ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:

"MGR" = Manager

"MGRM" = Managing Member

Name and Address:

MGRM

George Prendes
180 MADEIRA AVE
CORAL GABLES, FL. 33134

MGRM

Edgardo JARAMILLO
180 MADEIRA AVE
CORAL GABLES, FL. 33134

MGRM

Pedro INFANTE
180 MADEIRA AVE
CORAL GABLES, FL. 33134

MGRM

MANUEL INFANTE
180 MADEIRA AVE
CORAL GABLES, FL. 33134

(Use attachment if necessary)

NOTE: An additional article must be added if an effective date is requested.

REQUIRED SIGNATURE:

Edgardo Jaramillo

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.)

Edgardo JARAMILLO

Typed or printed name of signee

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent

\$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)