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

From:  
Account Name : MICHAEL J. FREEMAN, P.A.  
Account Number : 072720000142  
Phone : (305)442-1567  
Fax Number : (305)442-1227

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DIVISION OF CORPORATION

FLORIDA/FOREIGN LIMITED LIABILITY CO.

The Avanti 1-C, LLC

Certificate of Status	1
Certified Copy	1
Page Count	01
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*JSA*

Electronic Filing Menu

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I - Name:**

The name of the Limited Liability Company is:

The Avanti I-C, LLC

**ARTICLE II - Address:**

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

1055 North Shore Drive  
Miami Beach, FL 33141

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

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

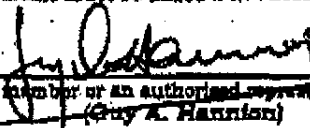
M.J.F. Registered Agent Corp.  
153 Sevilla Avenue  
Coral Gables, FL 33134

*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  
(Michael J. Freeman)

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



Signature of a member or an authorized representative of a member  
(Guy A. Harrison)

(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.)

**Filing Fees:**  
\$100.00 Filing Fee for Articles of Organization  
\$28.00 Designation of Registered Agent  
\$30.00 Certified Copy (Optional)  
\$5.00 Certificate of Status (Optional)

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