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

EFFECTIVE DATE

6/26/06

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

FILED
06 JUN 27 AM 9:33
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FLORIDA/FOREIGN LIMITED LIABILITY CO.

kendall hotel and suites l.l.c.

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DIVISION OF CORPORATIONS

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

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EFFECTIVE DATE

6/26/06

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is AND

Kendall Hotel Suites L.L.C.
(Must end with the words "Limited Liability Company," "Limited Company" or their abbreviations "LLC," or "L.C.")

ARTICLE II - Address:

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

Principal Office Address:

Richard F. O'Brien, III.
9155 South Dadeland Blvd Ste 1012
Miami, FL 33156

Mailing Address:

Philip Scutieri
9105 N Kendall Dr.
Miami, FL 33176

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:
(The Limited Liability Company must appoint in case Registered Agent. You must designate an individual or another business entity with an active Florida registration.)

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

Richard F. O'Brien, III
Name
9155 South Dadeland Blvd Ste 1012
Florida street address (P.O. Box NOT acceptable)
Miami 33156
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.

Richard F. O'Brien, III
Registered Agent's Signature (REQUIRED)

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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:

MGR

Richard F. O'Brien III
9135 South Dadeland Blvd. Ste 1012
Miami, FL 33156

(Use attachment if necessary)

ARTICLE V: Effective date, if other than the date of filing: 6/26/06 (OPTIONAL)
(If an effective date is listed, the date must be specific and cannot be more than five business days prior to or 90 days after the date of filing.)

REQUIRED SIGNATURE:

Richard F. O'Brien III
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.)

RICHARD F. O'BRIEN, III

Typed or printed name of signer

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TALLAHASSEE, FLORIDA

Filing Fees:

- \$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
- \$ 50.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)

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