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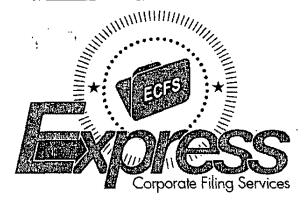
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TO ACKNOWLEDGE SUFFICIENCY OF FILING DEPARTMENT OF STATE DIVISION OF CURPORATION 4

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EXAMINER

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1000 Ponce de Leon Blvd. Suite: 101

Coral Gables, FL 33134

Phone: 305 444 4994

Email- filing@ecfsfiling.com

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

TEO STATEMENTS

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1.	West Miami (Corporation Name)	I, W	(Document #)
2.	(Corporation Name)		(Document #)
3.	(Corporation Name)		(Document #)
4.	(Corporation Name)		(Document #)
	Walk in Pick up time Mail out Will wait	Photocopy	Certified Copy Certificate of Status

		NEW FILINGS
		Profit
		NonProfit
	X	Limited Liability
,		Domestication
		Other

	AMENDMENTS
	Amendment
,	Resignation of R.A., Officer/ Director
	Change of Registered Agent
	Dissolution/Withdrawal
	Merger

OTHER FILINGS
Annual Report
Fictitious Name
Name Reservation

REGISTRATION/ QUALIFICATION
Foreign
Limited Partnership
Reinstatement
Trademark
Other

Examiner's Initia	als
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ARTICLES OF ORGANIZATION

OF

WEST MIAMI I, LLC

The undersigned members to these Articles of Organization hereby associate themselves together to form a Limited Liability Company under the laws of the State of Florida.

ARTICLE I NAME

The name of this Limited Liability Company is: WEST MIAMI I, LLC

ARTICLE II GENERAL NATURE OF BUSINESS

The Limited Liability Company may engage in any activity or business permitted under the laws of the United States and of the State of Florida.

ARTICLE III TERM OF EXISTENCE

This Limited Liability Company is to exist perpetually. The Limited Liability Company's business will continue without regard to the death, retirement, resignation, expulsion, bankruptcy or dissolution of a member or the occurrence of any other event which terminates the continued membership of a member in the Limited Liability Company.

ARTICLE IV ADDRESS

The principal office and mailing address of this Limited Liability Company in the State of Florida is 8500 SW 8th STREET, SUITE 228, MIAMI, FL 33144. The Board of Managers may from time to time move the principal office to another address in Florida.

ARTICLE V REGISTERED OFFICE, REGISTERED AGENT

That WEST MIAMI I, LLC, desiring to organize under the laws of the State of Florida, with its principal office as indicated in the Articles of Organization at the County of Miami-Dade, State of Florida, hereby designates ARAZOZA & FERNANDEZ-FRAGA, P.A., as its Registered Agent to accept services within the State. The registered office of the Limited Liability Company shall be 2100 SALZEDO STREET, SUITE 300, CORAL GABLES, FL 33134.



ARTICLE VI MANAGEMENT

The Limited Liability Company is to be managed by one or more managers and is, therefore, a manager - managed company. The Initial Manager of the Company shall be

MANUEL A. HERRAN of 8500 SW 8th STREET, SUITE 228, MIAMI, FL 33144

6500 SVV 6 STREET, SUITE 228, MIAMI, FL 55144
WITNESS the hand and seal of the Manager in Miami-Dade County, State of Florida, this 15 ^{Tl} day of Nevember, 2010
MANUEL A. HERRAN Manager
STATE OF FLORIDA)) SS: COUNTY OF MIAMI-DADE)
PERSONALLY appeared before me, MANUEL A. HERRAN, who is personally known to me or presented his as identification, who being by me first duly sworn, acknowledges that he signed the same for the purposes therein expressed.
WITNESS my hand and seal at Miami-Dade County, Florida this 15 ¹¹ day of November, 2010.
1/
NOTARY PUBLIC, STATE OF FLORIDA

AT LARGE

CARLOS F. ARAZOZA MY COMMISSION # DD 801427 EXPIRES: July 17, 2012 Bonded Thru Notory Public Underwriers

My commission expires:

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN FLORIDA, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In compliance with Section 48.091, Florida statutes, the following is submitted:

FIRST: That WEST MIAMI I, LLC, desiring to organize or qualify under the laws of the State of Florida, with its principal place of business at the County of Miami-Dade, State of Florida, designates ARAZOZA & FERNANDEZ-FRAGA, P.A., as its Registered Agent to accept services within the State. The registered office of the Limited Liability Company shall be 2100 SALZEDO STREET, SUITE 300, CORAL GABLES, FL 33134.

Having been named to accept service of process for the above stated Limited Liability Company, at the place designated in this certificate, I hereby agree to act in this capacity, and I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties.

The Registered Agent

Arazoza & Fernandez-Fraga, PA

By: Carlos F. Arazoza

Director

Date: November-04, 2010

(Garage 15, 2011