

299000004902



THE UNITED STATES CORPORATION COMPANY

ACCOUNT NO. : 072100000032

REFERENCE : 333132 11654A

AUTHORIZATION :

Patricia Pignatelli

COST LIMIT : \$ ~~78.75~~

ORDER DATE : August 6, 1999

337.50

ORDER TIME : 11:25 AM

ORDER NO. : 333132-005

CUSTOMER NO: 11654A

700002952837--2

CUSTOMER: Judy Baxter, Legal Asst
HOLTZMAN KRINZMAN EQUELS &
HOLTZMAN KRINZMAN EQUELS &
2601 South Bayshore Drive
Suite 600
Miami, FL 33133

DOMESTIC FILING

NAME: SOUTH POINTE SUNSHINE, LLC

EFFECTIVE DATE:

ARTICLES OF INCORPORATION
 CERTIFICATE OF LIMITED PARTNERSHIP

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY
 PLAIN STAMPED COPY
 CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Janine Lazzarini

EXAMINER'S INITIALS:

JK 8/6/99

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
99/AUG-6 PM 3:16

RECEIVED
99 AUG -6 PM 12:14
DIVISION OF CORPORATIONS



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State

August 9, 1999

JANINE LAZZARINI
CSC NETWORKS
TALLAHASSEE, FL

SUBJECT: SOUTH POINTE SUNSHINE, LLC
Ref. Number: W99000018327

RESUBMIT
Please give original
submission date as file date.
99-00018327
DIVISION OF CORPORATIONS
FILED STATE SECRETARY OF STATE
AUG 13 1999

We have received your document for SOUTH POINTE SUNSHINE, LLC and the authorization to debit your account in the amount of \$337.50. However, the document has not been filed and is being returned for the following:

In ARTICLE II, it states that "THE MAILING ADDRESS OF THE PRINCIPAL OFFICE OF THE..COMPANY IS:"

As discussed, this is not exactly what the law requires. What your document must state is the "PRINCIPAL OFFICE ADDRESS OF THE COMPANY." And then the document must state the "MAILING ADDRESS OF THE COMPANY.",

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6914.

Buck Kohr
Corporate Specialist

Letter Number: 899A00040024

RECEIVED
CORPORATIONS
AUG 13 1999

ARTICLES OF ORGANIZATION FOR
SOUTH POINTE SUNSHINE, LLC
A FLORIDA LIMITED LIABILITY COMPANY

SECRETARY OF STATE
DIVISION OF CORPORATIONS
99 AUG -6 PM 3:16

ARTICLE I - Name:

The name of the Limited Liability Company is:

SOUTH POINTE SUNSHINE, LLC

ARTICLE II - Address:

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

1143 Roberto Lane
Los Angeles, CA 90077

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be perpetual.

ARTICLE IV - Management:

The Limited Liability Company is to be managed by a member who shall serve as the manager of the Limited Liability Company until the first meeting of members or until his successor(s) are elected and qualified, and whose name and address is as follows:

Michael Gleissner
1143 Roberto Lane
Los Angeles, CA 90077

AFFIDAVIT OF MEMBERSHIP AND CONTRIBUTIONS

The undersigned member or authorized representative of a member of SOUTH POINTE SUNSHINE, LLC deposes and says:

- (1) the above named Limited Liability Company has at least one (1) member;
- (2) the total amount of cash contributed by the member(s) is: \$1,000.00;
- (3) if any, the agreed value of property other than cash contributed by member(s) is: \$-0-;
- (4) the total amount of cash or property anticipated to be contributed by member(s) is \$1,000.00. This total includes amounts from 2 and 3 above.

FILED IN STATE NOTARY PUBLIC DIVISION OF CORPORATIONS 1999 AUG - 6 PM 3:19

[Handwritten Signature]

Signature of Member or Authorized Representative of a Member

STATE OF FLORIDA
COUNTY OF DADE

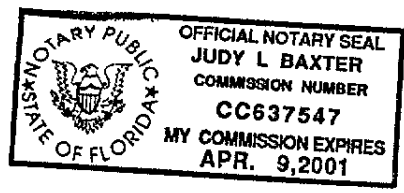
THE FOREGOING INSTRUMENT was acknowledged before me on this 5th day of August, 1999, by Alan E. Krinzman, an authorized representative of Michael Gleissner, a member of SOUTH POINTE SUNSHINE, LLC. He is personally known to me or has produced _____ as identification.

NOTARY PUBLIC, STATE OF FLORIDA

Sign: Judy L. Baxter

Print: JUDY L. BAXTER

My commission expires:



**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

PURSUANT TO THE PROVISIONS OF SECTIONS 608.415 OR 608.507, FLORIDA
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE
FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

FILED
STATE
OFFICE OF
CORPORATIONS
TALLAHASSEE
AUG - 6 PM 3:19

1. The name of the Limited Liability Company is:

SOUTH POINTE SUNSHINE, LLC

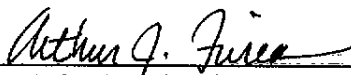
2. The name and address of the registered agent and office is:

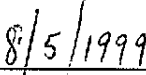
HKE&F Registered Agent Corp.
2601 S. Bayshore Drive
Suite 600
Miami, Florida 33133

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 appointments 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.

REGISTERED AGENT:

HKE&F Registered Agent Corp.


By: Arthur J. Furia, Vice President


Date