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Florida Department of State

Division of Corporations

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Katherine Harris, Secretary of State

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To:

Division of Corporations
Fax Number : (850) 922-4003

From:

Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 541-3694
Fax Number : (305) 541-3770

Kathy
figa
w/c/b.
12:10
CM

LIMITED LIABILITY COMPANY

TAVISTOCK, WELLINGTON, L.C.

Certificate of Status	0
Certified Copy	1
Page Count	05
Estimated Charge	\$337.50

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ARTICLES OF ORGANIZATION
OF
TAVISTOCK, WELLINGTON, L.C.

ARTICLE I - Name

The name of the limited company is TAVISTOCK, WELLINGTON, L.C. (the "Company").

ARTICLE II - Duration

The period of duration for the Company shall be 50 years.

ARTICLE III - Address

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

16485 Collins Avenue
Suite 2731
Miami Beach, Florida 33160

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ARTICLE IV - Initial Registered Office and Agent

The name of the initial registered agent of the company and the street address of the registered office of the company is:

Clive Lewis
16485 Collins Avenue
Suite 2731
Miami Beach, Florida 33160

ARTICLE V - Management

The Company is to be managed by a manager or managers and the names and addresses of such managers who are to serve as managers are:

Clive Lewis
16485 Collins Avenue
Suite 2731
Miami Beach, Florida 33160

This instrument prepared by:

Elliott Harris, Esq. FBN-097072
111 S.W. 3rd Street (305) 358-8146
Sixth Floor
Miami, Florida 33130

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ARTICLE VI - Purpose

This Company is organized for the purposes of transacting any and all lawful business authorized to Limited Liability Companies organized in Florida.

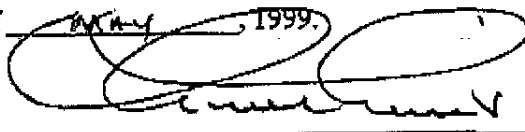
ARTICLE VII - Admission of Additional Members

The members of the Company shall have the right to admit additional members by the unanimous consent of, and subject to the terms and conditions of, all the remaining members.

ARTICLE VIII - Members Rights to Continue Business

The members of the Company shall not have the right to continue the business on 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 unless the business of the Company is continued by the consent of all of the remaining members.

IN WITNESS WHEREOF, I have hereunto affixed my hand, as a member of this Limited Liability Company on this 11 day of MAY, 1999.



CLIVE LEWIS

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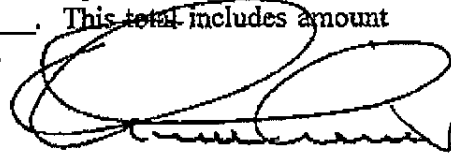
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AFFIDAVIT OF MEMBERSHIP OF CONTRIBUTIONS

A member of Tavistock Wellington, L.C. deposes and says:

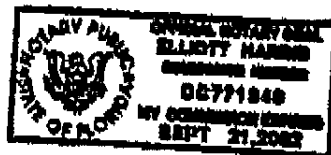
- 1) the above named Limited Liability Company has at least two members.
- 2) the total amount of cash contributed by the members is \$200,000.00.
- 3) the total amount of cash or property anticipated to be contributed by members is \$ 200,000.00. This total includes amount from Item 2 above.

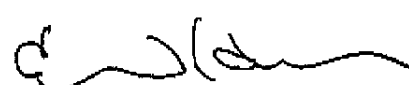


CLIVE LEWIS, Member

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)

The foregoing instrument was acknowledged before me this 11 day of May, 1999, by Clive Lewis, who is personally known to me or who has produced _____ as identification and who did take an oath.




Notary Public, State of Florida
At Large
Print Name:
Commission No.
My commission expires:

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

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


- 1) The name of the Limited Liability Company is: TAVISTOCK, WELLINGTON, L.C.
- 2) The name and address of the registered agent and office is:

Clive Lewis
16485 Collins Avenue
Suite 2731
Miami Beach, Florida 33160

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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.

5/11/99
Date


CLIVE LEWIS

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