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| (Requestor's Name) |
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| (Address) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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MURAI WALD BIONDO & MORENO

Professional Association Attorneys at Law

July 23, 2009

Via FedEx

State of Florida Division of Corporations New Filing Section LLC 2661 Executive Center Circle Tallahassee, Florida 32301

Attention: Brenda Tadlock

Re: Eden Roc, LLC

Dear Ms. Tadlock:

As per my conversation with Stacey Prather, enclosed please find Articles of Organization for Eden Roc, LLC, together with a check in the amount of \$55.00 payable to the Department of State for the filing of the Articles of Organization of Eden Roc, LLC. This filing replaces the filing of Eden Roc Corporation under Document Number W09000032415.

If you have any questions, please do not hesitate to contact us.

1 1/

Darlene Galdo

Assistant to Rene V. Murai

/dg Enc.

GADATA\Eden Roc\State of Florida Div of Corp \u00e4r 7-15-09 doc

COVER LETTER

| TO: | Registration S Division of Co | | | | | |
|---------|--------------------------------|---|-----------|--|--|---|
| SUBJI | ECT: | Е | Eden | Roc, I | LLC | |
| | | Name of Limit | ed Liab | oility Con | npany | |
| The en | closed Articles o | of Organization and fee(s) are | submit | ted for fil | ing. | |
| Please | return all corresp | condence concerning this mat | ter to th | ne followi | ng: | |
| | | F | | V. Mura | <u>i</u> | |
| | | | | | | |
| | | Murai Wald | | | oreno, P.A | <u>. </u> |
| | | | Firm/0 | Company | | |
| | | 1200 Pone | ce de | Leon E | Boulevard | |
| | | - | Ad | ldress | | |
| | | CORAL GA | BLES | S, FLOF | RIDA 3313 | 4 |
| | | Cit | y/State | and Zip Co | ode | |
| | | | | mwbm. | | |
| | | E-mail address: (to be used | | re annuar re | sport notification | on) |
| For fur | ther information | concerning this matter, please | e call: | | | |
| | Darlo | ene Galdo | _ at (_ | 305 |) | 444-0101 |
| · · · | Name | of Person | | Area Co | ode & Daytime | Telephone Number |
| Enclos | sed is a check for | or the following amount: | | | | |
| \$125. | .00 Filing Fee | \$130.00 Filing Fee & Certificate of Status | C | ertified C | ling Fee & Copy opy is enclosed | \$160.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |
| | | Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 | | Registr Division Clifton 2661 E | Courier Add ration Section on of Corpora Building Executive Cen assee, FL 323 | tions ter Circle |

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

| ARTICLE 1 - Name: The name of the Limited Liability Compa | any is: | OP JUL 24 AN IO: | | | | |
|---|--|--------------------------------------|--|--|--|--|
| Eden l | Roc, LLC | 2 N | | | | |
| | d Liability Company," "L.L.C.," or "LLC.") | # 6 8 Y | | | | |
| ARTICLE II - Address: The mailing address and street address of | the principal office of the Limited Liability Co | 9 | | | | |
| Principal Office Address: | Mailing Address: | , , | | | | |
| 848 Brickell Avenue Suite 700 | 848 Brickell Avenue | | | | | |
| Miami, Florida 33131 | Miami, Florida 33131 | | | | | |
| | stered Office, & Registered Agent's Signaturn Registered Agent. You must designate an individual or anot of the registered agent are: | | | | | |
| Murai Wald Bi | iondo & Moreno, P.A. | | | | | |
| | Name | | | | | |
| 1200 Ponce | | | | | | |
| 1200 Ponce de Leon Boulevard Florida street address (P.O. Box <u>NOT</u> acceptable) | | | | | | |
| Coral Gables 331 | 134 _{FL} | | | | | |
| City, 5 | State, and Zip | | | | | |
| liability company at the place designate registered agent and agree to act in this co statutes relating to the proper and compl | and to accept service of process for the above stated in this certificate, I hereby accept the appoint apacity. I further agree to comply with the provide performance of my duties, and I am familiar as registered agent as provided for in Chapter 60 | ment as isions of all with and | | | | |

Registered Agent's Signature (REQUIRED)

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

| | r | |
|---|--|--|
| "MGR" = Manage "MGRM" = Mana | | |
| IVIORIVI — IVIAIIA | ging Member | |
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| fective date is listed days after the date REQUIRED SIG | ed, the date must be see of filing.) NATURE: Signature of a member of the section of the secti | or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution under the penalties of perjury |
| fective date is listed days after the date REQUIRED SIG | NATURE: Signature of a member of this document constituted that the facts stated herei | or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution under the penalties of perjury n are true.) Rene V. Murai |
| fective date is listed days after the date REQUIRED SIG | NATURE: Signature of a member of this document constituted that the facts stated herei | or an authorized representative of a member. on 608.408(3), Florida Statutes, the execution utes an affirmation under the penalties of perjury n are true.) |

of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)