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

From: Account Name : EMPIRE CORPORATE KIT COMPANY
Account Number : 072450003255
Phone : (305) 634-3694
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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LIMITED LIABILITY COMPANY

one arvida, llc

Certificate of Status	0
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**ARTICLES OF ORGANIZATION FOR
FLORIDA LIMITED LIABILITY COMPANY**

ARTICLE I - NAME:

The name of the Limited Liability Company is:

ONE ARVIDA, LLC.

ARTICLE II - ADDRESS:

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

**2 ALHAMBRA PLAZA
SUITE 860
CORAL GABLES, FLORIDA 33134**

**ARTICLE III - REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED
AGENT'S SIGNATURE:**

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

**CARLOS E. PADRON
VILA, PADRON & DIAZ, P.A.
2 ALHAMBRA PLAZA
Suite 860
Coral Gables, Florida 33134
Telephone: (305) 461-4888
Facsimile: (305) 461-0261**

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ONE ARVIDA, LLC.
Articles of Organization
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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 as provided for in Chapter 608, F.S.


CARLOS E. PADRON
REGISTERED AGENT

12/10/03
DATE


PILAR F. GIORGINI
MANAGER

12/9/03
DATE

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(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.)

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