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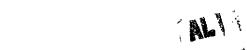
Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255

: (305)541-3694

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LIMITED LIABILITY COMPANY

SUNRISE 72, LLC

Certificate of Status	
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00



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ARTICLES OF ORGANIZATION OF SUNRISE 72, LLC



ARTICLEI - NAME

The name of the Limited Liability Company is: SUNRISE 72, LLC

ARTICLE II- ADDRESS

The mailing address and street address of the principal office of the Limited Liability Company is: 311 Lincoln Road, Suite 200, Miami Beach, Florida 33139.

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 the following members and the names and addresses of such managing members are:

Name

Address

Mera Rubell

311 Lincoln Road

Suite 200

Miami Beach, Florida 33139

ARTICLE V - EFFECTIVE DATE

The effective date of formation of the Limited Liability Company is March 15, 2000.

IN WITNESS WHEREOF, the undersigned Managing Member has executed these Articles of Organization this 15th day of March, 2000.

Preparer: Norman S. Weider, Esq. 100 S.E. 2 St. #3910 Miami,FL 33131 (305) 371-6338 - FL BAR #150388

MERA RUBELL Managing Member

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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: SUNRISE 72, LLC
- 2. The name and address of the registered agent and office is:

Norman S. Weider, Esq. 100 S.E. 2nd Street Suite 3910 Miami, Florida 33131

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 PROPERTY AND COMPLETE PERFORMANCE OF MY DUTIES, AND I AM FAMILIAR WITH AND ACCEPT THE OBLIGATIONS OF MY POSITION, AS REGISTERED AGENT.

NORMAN SWEDER, ESO

DATE:

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