

**L00000004907**

Florida Department of State  
Division of Corporations  
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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

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00 APR 28 AM 10:54  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**LIMITED LIABILITY COMPANY**

deco inn, LLC.

RECEIVED  
00 APR 28 PM 2:26  
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TALLAHASSEE, FLORIDA

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

ARTICLE I - Name:

The name of the Limited Liability Company is:

DECO INN, L.L.C.

ARTICLE II - Address:

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

520 Brickell Key Drive, Suite 0-305  
Miami, Florida 33131

ARTICLE III - Duration:

The period of duration for the Limited Liability Company shall be:

Perpetual

ARTICLE IV - Management

(check and complete the appropriate statement)

☒ The Limited Liability Company is to be managed by a  
manager and the name and address of such manager who is  
Arnoldo Kleidermacher to serve as manager is:

520 Brickell Key Drive, Suite 0-305  
Miami, Florida 33131

Prepared by:

Nicholas Stanbury, Esq.  
Fla. Bar No. 0038822  
Freeman Bukerman & Haber & Rojas, LLP  
520 Brickell Key Drive, 0-305  
Miami, Florida 33131

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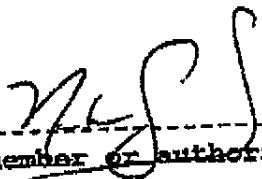
**ARTICLE V - Admission of Additional Members:**

The members will have the right to admit additional members.

**ARTICLE VI - Members Rights to Continue Business:**

The remaining members of the limited liability company will 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.

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Signature of a member or authorized representative of a member.

(In accordance with section 608.408(3), Florida Statutes, the execution of this affidavit constitutes an affirmation under the penalties of perjury that the facts stated herein are true.)

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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 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:

DECO INN, L.L.C.

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

Nicholas Stanham, Esq.  
Freeman, Buttermann, Haber & Rojas LLP  
520 Brickell Key Drive, Suite 0-305  
Miami, Florida 33131

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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.

  
(SIGNATURE)

4-28-00  
(DATE)

**Filing Fee: \$35 for Designation of Registered Agent**

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