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Joaquin E. Luaces 6000 S.W. 70th Street Miami, Florida 33143

July 31, 2000

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Registration Section Division of Corporations 409 E. Gaines Street Tallahassee, Florida 32399

Re.: Miami Mar LLC

Dear Sir or Madam:

My name, address and daytime phone number is as follows:

Joaquin E. Luaces 6000 S.W. 70th Avenue Miami, Florida 33143

Phone: 305-266-5920

DO AUG 17 PM 1: 18 SECRETARY OF STATE

Sincerely,

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FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State

August 7, 2000

JOAQUIN E. LUACES 6000 S.W. 70TH STREET MIAMI, FL 33143

SUBJECT: MIAMI MAR LLC Ref. Number: W00000019540

We have received your document for MIAMI MAR LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 487-6913.

Diane Cushing Corporate Specialist

Letter Number: 600A00042610

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Miami Mar LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company is: 6000 S.W. 70th Street, Miami, FL 33143

ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

SE	reet address of the registered agent are:	₹.0	\Box	
	Nicholas J. Barbella		IO A	
_	Name	<u> </u>	AUG	
	6000 S.W. 70th Street	્રેં≩		=
	Florida street address (P.O. Box <u>NOT</u> acceptable) Miami FL 33143	HOY CH	70	C
	City, State, and Zip	FLOF		
_	6000 S.W. 70th Street Florida street address (P.O. Box NOT acceptable) Miami FL 33143	TARY OF STA	17 PH 1	. !

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..

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

X The Limited Liability Company is to be managed by one manager or more managers and is, therefore, a manager - managed company.

(An additional article must be added if an effective date is requested)

Signature of a member or an authorized representative of a member.

(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.)

uin Luaces

Typed or printed name of signee

FILING FEES:

\$ 100.00 Filing Fee for Articles of Organization

\$ 25.00 Designation of Registered Agent

\$ 30.00 Certified Copy (OPTIONAL)

\$ 5.00 Certificate of Status (OPTIONAL)