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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

## LIMITED LIABILITY COMPANY

ARQUINPRO CONSTRUCTION AND DEVELOPMENT, LLC

RECEIVED  
00 SEP 14 AM 7:35  
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TALLAHASSEE, FLORIDA

Certificate of Status	0
Certified Copy	1
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9/13/00 5:13 PM

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**ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY**

**ARTICLE I- Name:**

The Name of the Limited Liability Company is:

**ArquInpro Construction and Development, L.L.C.**

**ARTICLE II- Address:**

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

**999 Ponce de Leon Blvd., Suite 715, Coral Gables, Florida 33134**

**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 a manager and the name and address of such manager who is to serve as manager:

**PADIAL & ASSOCIATES, P.A.  
999 Ponce de Leon Blvd., Suite 715  
Coral Gables, Florida 33134**

By:  **PADIAL & ASSOCIATES, P.A.**  
Signature of a member or an 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.)

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

The right, if given, of the members to admit additional members and the terms and conditions of the admissions shall be:

**Pursuant to the Management Agreement**

**Jordan, Padial & Co.  
999 Ponce de Leon Blvd., Suite 715  
Coral Gables, Florida 33134  
(305) 443-8010**

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

The right, if given, of the remaining members of the limited liability company 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, shall be:

**Pursuant to the Management Agreement****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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

**Arquinpro Construction and Development , L.L.C.**

2. The name of the Florida street address of the registered agent are:

**Padial & Associates, P.A.**

Name

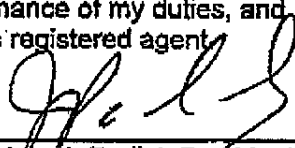
**999 Ponce de Leon Blvd., Suite 715**

Florida street address (P.O. Box Not ACCEPTABLE)

**Coral Gables, Florida 33134**

City, State and Zip

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.

  
\_\_\_\_\_  
Jose I. Padial, President, Padial & Associates, P.A.

Jordan, Padial & Co.  
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