MIAMI, FL	32050 33143		•
City/State/Zip	Phone #		600004549166- -08/22/010107300 ****160.00 ****160
			Office Use Only
CORPORATION NAM	E(S) & DOCUM	ÆNT NUMBER(S), (i	f known):
CROUF SQUAR	e 412-413	3-419/11	
1. <u>SROVE</u> SQUAR (Corporatio	$\frac{2}{12}$ (12) (1) in Name)	(Document #)	, , , , ,, , , , ,,
>			
2(Corporatio	n Name)	(Document #)	<u></u>
3			
(Corporatio	n Name)	(Document #)	
4.			
(Corporatio	n Name)	(Document #)	<u> </u>
Walk in	Pick up time		Certified Copy
Mail out	Will wait	Photocopy	Certificate of Status
NIEXX EEL INGG			AZ C
NEW FILINGS		AMENDMENTS	.A., Officer/Director
ProfitNot for Profit		Amendment Resignation of R	A., Officer/Director
Limited Liability		Change of Regis	
Domestication	· ·	Dissolution/With	
U Other		Merger	ndrawal
OTHER FILINGS		REGISTRATION/C	DUALIFICATION
Annual Report		G Foreign	
Fictitious Name		Limited Partners	hip
I TOULIOUS INAMIC			mp
		Reinstatement Trademark	

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

Grove Square 412 - 413 - 419, LLC

ARTICLE II - Address:

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

7001 S. W. 61st Avenue, Miami, Florida 33143

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

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

Linda F. Murphy Name 7001 S. W. 61st. Avenue, Florida street address (P.O. Box NOT acceptable) Florida FL 33143 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 as provided for in Chapter 608, F.S.,

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

Article IV - Management (Check box II applicative.) The Limited Liability Company is to be managed by one manager or more manages therefore, a manager - managed company. and

(An additi	onal an	icle mu	st be add	led_i≨a	n.effec	tive da	e is requested	f)
	/	Ju	rda	7.1	Hei	nh	1/	~7
Signatu	re ofai	hember o	or an anth	orized	epreser	Kative	f 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.)

Linda F. Murphy

Typed or printed name of signee

Filing Fees:

\$100.00 Filing Fee for Articles of Organization

in 15 *

- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)

\$ 5.00 Certificate of Status (Optional)