

Florida Department of State

Division of Corporations Public Access System Katherine Harris, Secretary of State

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H01000099642 0)))

Note: DO NOT at the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations Fax Number : (850)20

: (850)205-0383

From:

Account Name

: FOWLER, WHITE, BURNETT, ET AL

Account Num Phone Fax Number

mber : 071250001512 : (305)789-9200 : (305)789-9201 Fig. 17

LIMITED LIABILITY COMPANY

1430-34 S. MIAMI AVENUE, LLC

0
1
03
\$155.00

OI SEP IN AM 7: 42

SECHEDARY TO SERVE

Audit No. H01000099642

Audit No. H 01000099642 0

ARTICLE V

The Limited Liability Company shall be member-managed.

J Michael Pennekamp

as Authorized Representative of the Members

SEP STATE

SEP STATE

OF STATE

STATE OF FLORIDA

COUNTY OF MIAMI-DADE

Before me personally appeared J. Michael Pennekamp, as Authorized Representative of the Members, Who is personally known to me, or \square who produced ______ as identification, to be the person who executed the foregoing Articles of Organization.

In witness whereof I have hereunto set my hand and official seal this L3 day of ______

Jujith D. Roeman

Jujith D. Roeman

Notary Public, State of Florida

Commission No. C 578388

W Commission Ep 10/18/2001

Banded Through Fig. Notary Service & Conding Co.

Notary Public

Print Name: JUDITH D. ROOMAN

My Commission expires: 10/19/2001

Audit No. H 01000099642 0

Audit No. Ho1000099642

ERTIFICATE OF DESIGNATION OF RESIDENT AGENT AND CCEPTANCE OF DESIGNATION

Pursuant to the provisions of Section 608.415, Florida Statutes, the undersigned limited liability company organized under the laws of the state of Florida, submits the following statement in designating its Registered Office and Registered Agent in the State of Florida:

- 1. The name of the limited liability company is 1430-34 S. MIAMI AVENUE, LLC
- 2. The name and addiess of the Registered Agent and Office is:

J. Michael Pennekamp, Esq. 100 S.E. and Street, 18th Floor Miami, Forida 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 the 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 am familiar with and accept the obligations of my position as Registered Agent.

J. Michael Pennekamp, Registered Agent

Date: _____

1430-34 S. MIAMI AVENUE, LLC

J. Michael Pennekamp, as authorized Representative of the Members

Audit No. H 01000099642

[jdr] W:\56165\ARTORG46.JDR{9/12/--5:17}