Page 1 of 2

Division of Corporations

LoloOOOOOOOOAOA76

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.

(((H01000116533 0)))

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

To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : BERGER SINGERMAN

Account Number: Il9990000048

Phone : (954) 525-9900

Fax Number : (954)523-2872

AL

01 NOV 26 PH 12: 2

# LIMITED LIABILITY COMPANY

MRA PELICAN MANAGER, LLC

Certificate of Status	1
Certified Copy	1
Page Count	02
Estimated Charge	\$160.00

FAX AUDIT #: H01000116533 0

# ARTICLES OF ORGANIZATION OF

# MRA PELICAN MANAGER, LLC A FLORIDA LIMITED LIABILITY COMPANY

SECRETALLY OF STATE TALLAHASSEE FLORIDA

The undersigned, in forming a Florida Limited Liability Company ("Company") under the Florida Limited Liability Company Act, Chapter 608 of the Florida Statutes, hereby adopt the following Articles of Organization for such Company:

## ARTICLE I

#### **NAME**

The name of the Company is MRA PELICAN MANAGER, LLC.

### ARTICLE II

#### **ADDRESS**

The mailing address and the street address of the principal office of the Company is 900 SE 3<sup>rd</sup> Avenue, Suite 201, Fort Lauderdale, Florida 33316.

#### **ARTICLE III**

#### INITIAL REGISTERED AGENT

The name and address of the initial Registered Agent of the Company is Robert W. Barron, 350 East Las Olas Boulevard, Suite 1000, Fort Lauderdale, Florida 33301.

#### ARTICLE IV

#### **MANAGEMENT**

The Company shall be a manager-managed company.

FAX AUDIT #: H01000116533 0

196458-1

SECRETALLY OF STATE A TALLAHIASSEE, FLORIDA

FAXAUDIT #: M01000116533 0

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

Dated: Movember 21, 2001

ROBERT W. BARRON, Authorized

Representative

# ACCEPTANCE OF DESIGNATION AS REGISTERED AGENT

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. Florida Statutes.

Dated: November 21, 2001

ROBERT W. BARRON, Initial Registered

Agent

FAX AUDIT #: H01000116533 0