

L010000020874

LAW OFFICE OF  
TRACEY SKINNER BROWN

RIVIERA PROFESSIONAL BUILDING  
SUITE 305  
4675 PONCE DE LEON BOULEVARD  
CORAL GABLES, FLORIDA 33146

TELEPHONE (305) 666-5222  
FACSIMILE (305) 667-0206

November 28, 2001

Via Federal Express

Department of State  
Division of Corporations  
409 East Gaines Street  
Tallahassee, Florida 32399

Re: SOUTHPROP, LLC

Gentlemen:

I am enclosing herewith an original and a copy of Articles of Organization for Florida Limited Liability Company for the above-named Company. In addition, a check in the sum of \$125.00 is enclosed which represents the following fees:

Filing Fee	\$100.00	800004699138--8
Designation of R.A.	\$ 25.00	-11/30/01--01004--002
		****125.00 ****125.00
Total	<u>\$125.00</u>	

Please file the original of the enclosed Articles of Organization and return a copy to the undersigned in the enclosed envelope.

Your prompt attention to this matter would be appreciated.

Very truly yours,

*Tracey S. Brown*  
Tracey S. Brown

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
NOV 29 PM 1:06  
WC  
12/4

TSB/ep  
Enclosures  
cc: client

EFFECTIVE DATE  
11/28/01

# ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## ARTICLE I - Name:

The name of the Limited Liability Company is:

SOUTHPROP, LLC

## ARTICLE II - Address:

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

4675 Ponce de Leon Boulevard, Suite 305  
Coral Gables, FL 33146

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

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

Tracey S. Brown, Esq.

Name

4675 Ponce de Leon Boulevard, Suite 305

Florida street address (P.O. Box NOT acceptable)

Coral Gables, FL 33146

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..*

*Tracey S. Brown*

Registered Agent's Signature

## Article IV - Management (Check box if applicable.)

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

## Article V - Effective Date

The effective date of SOUTHPROP, LLC shall be November 28, 2001.

*Tracey S. Brown*

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.)

Tracey S. Brown

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)

EFFECTIVE DATE

11/28/01

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
01 NOV 29 PM 1:06