Florida Department of State

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

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number: 072450003255 Phone

: (305)634-3694 Fax Number : (305)633-9696

LIMITED LIABILITY COMPANY

OAK GROVE ASSOCIATES, L.L.C.

Certificate of Status	0
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Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION FOR OAK GROVE ASSOCIATES, L.L.C. A FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - NAME

The name of the Limited Liability Company is:

OAK GROVE ASSOCIATES, L.L.C.

<u> ARTICLE II - ADDRESS</u>

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

4300 North University Drive, Suite B-104 Lauderhill, FL 33351

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

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

Norman T. Roberts 50 West Mashta Drive, Suite 2 Key Biscayne, Florida 33149

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 property 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.,

Roberts, Registered Agent

Norman T. Roberts

Authorized Representative of a Member

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