### 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.

(((H02000038281 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

: EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone

: (305)634-3694

Fax Number

: (305)633-9696

JIVISION OF CHARPORATION

# LIMITED LIABILITY COMPANY

shadow creek investments, llc

Service Control of the Control of th	
Certificate of Status	0
Certified Copy	1
Page Count	7.0
Estimated Charge	F
S. Harrison and C. Harrison an	\$155.00

# HOJOOO3828



OF

#### SHADOW CREEK INVESTMENTS, LLC

The undersigned, for the purpose of forming a limited liability company under the Florida Limited Liability Company Act, F.S. Chapter 608, hereby make, acknowledge, and file the following Articles of Conganization.

#### ARTICLE I - NAME

The name of the limited liability company shall be <u>SHADOW CREEK INVESTMENTS</u>, <u>L.1. C.</u> ("Company").

#### ARTICLE II - ADDRESS

The mailing address and street address of the principal office of the company shall be 2655 Lejeune Road, Penthouse 1-C, Coral Gables, Florida 33134.

#### ARTICLE III - DURATION

The company shall commence its existence on the date these Articles of Organization are filed by the Florida Department of State. The company's existence shall be perpetual, unless the company is earlier dissolved as provided in these Articles of Organization.

### ARTICLE IV - REGISTERED OFFICE AND AGENT

The name and street address of the Registered Agent of the company in the State of Florida is LUIS CORNIDE at 2655 Lejeune Road, Penthouse 1-C, Coral Gables, Florida 33134.

THIS INSTRUMENT PREPARED BY,
Oscar J. Vila, III., ESQUIRE
Vila & Padron, P.A.
2100 SALZEDO STREET, SUITE 300
CORAL GABLES, FL. 33134
TELEPHONE (305) 461-4888
FLORIDA BAR #899976

HO200003828)

# PAGE TWO ARTICLES OF ORGANIZATION OF SHADOW CREEK INVESTMENTS, L.L.C

FILED SECRETARY OF STAT TALLAHASSEE, FLORI

# ARTICLE V - ADDITIONAL CAPITAL CONTRIBUTIONS

Each member shall make additional capital contributions to the company only on the unanimous consent of all the members.

## ARTICLE VI - ADMISSION OF NEW MEMBERS

No additional members shall be admitted to the company except with the unanimous written consent of all the members of the company and on such terms and conditions as shall be determined by all the members. A transferee shall have no right to participate in the management of the business and affairs of the company or become a member unless all the other members of the company other than the member proposing to dispose of his or her interest approve of the proposed transfer by unanimous written consent.

# ARTICLE VII - TERMINATION OF EXISTENCE

The company shall be dissolved on the death, bankruptcy, or dissolution of a member or manager, or on the occurrence of any other event that terminates the continued membership of a member in the company, unless two remaining members, provided there are at least two remaining members.

### ARTICLE VIII - MANAGEMENT

The company shall be managed by a manager in accordance with regulations adopted by the members for the management of the business and affairs of the company. These regulations may contain any provisions for the regulation and management of the affairs of the company not inconsistent with law or these articles of organization. The name and address of the initial managers of the company signing these Articles is:

Luis Comide Robert De La Riva

#### PAGE THREE OF ARTICLES OF ORGANIZATION OF SHADOW CREEK INVESTMENTS, LLC.,

## ARTICLE IX - INDEMNIFICATION AND LIABILITY

The Company may, as determined by the managers of the Company, indemnify and advance expenses to a Member, Manager, employee or agent of the Company in connection with any proceeding, to the extent permitted by and in occordance with applicable laws and statutes and the regulations of the Company.

IN WITNESS WHEREOF, the undersigned organizers have made and subscribed these Articles of Organization in Miami, Florida, on this 15 day of February, 2002.

STATE OF FLORIDA

COUNTY OF MIAMIDADE

Before me, a Notary Public authorized in the State and County set forth above, personally appeared LUIS CORNIDE me and known by me to be the persons, who, as organizers, executed the foregoing Articles of Organization and acknowledged before me that they executed those Articles of Organization.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this <u>15</u> day of <u>February</u>, 2002.

NOTARY PUBLIC, State of Florida

WITHERN HARRIST

Printed Name of Notary Public

My Commission Expires: Cong /23/05

#### H02000038281

#### PAGE FOUR ARTICLES OF ORGANIZATION OF SHADOW CREEK INVESTMENTS, LLC

# ACCEPTANCE OF REGISTERED AGENT

The undersigned, being the person named in the articles of organization of SHADOW CREEK INVESTMENTS, LLC, limited liability company, hereby consents to accept service of process for the above stated company at the place designated in the Articles of Organization, and accepts the appointment as Registered Agent and agrees to act in this capacity. The undersigned further agrees to comply with the provisions of all statutes relating to the proper and complete performance of his or her duties, and is familiar with and accept the obligations of the position of Registered Agent.

LUIS CORNIDE

Registered Agent

STATE OF FLORIDA

COUNTY OF MIAMIDADE

55.

Before me, a Notary Public authorized in the State and County set forth above, personally appeared LUIS CORNIDE known to me and known by me to be the person, who, as registered agent and organizer, executed the foregoing Acceptance and acknowledged before me that he executed same knowingly and voluntarily.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal, in the State and County aforesaid, this 15 day of February, 2002.

NOTARY PUBLIC, State of Florida

Printed Name of Notary Public

My Commission Expires: Occ /23/05

COL PLON MA COMMENTAL SEY

402000038281