

Character Number Only  
**L0200000041003**

2/18/02 Marsha

Alan B. Hecht

Requestor's Name  
2070 NE 215 Street

Address  
Miami FL 33180.

City State ZIP Phone  
(305) 933-1441B.

VALIDATION ONLY

000004960420--0  
-02/20/02--01023--009  
\*\*\*155.00 \*\*\*155.00

CORPORATION(S) NAME

TurningPoint Ventures, LLC



Empire Top Aid  
Free: 1-800-432-3028

02 FEB 20 AM 11:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

- Profit
- NonProfit
- Foreign
- Limited Partnership
- Reinstatement
- Certified Copy
- Call When Ready
- Walk In
- Amendment
- Dissolution
- Annual Report
- Reservation
- Photo Copies
- Call If Problem
- Will Wait
- Merger
- Mark
- Other LLC
- Change of Registered Agent
- Certificate Under Seal
- After 4:30
- Mail Out

Name
Availability
Document
Examiner
Updater
Verifier
Acknowledgment
W.P. Verifier

cert copy  
RECEIVED  
02 FEB 20 AM 9:05

2002-2

**ARTICLES OF ORGANIZATION  
OF  
TurningPoint Ventures, LLC  
A Florida Limited Liability Company**

The undersigned, a natural person, does hereby form a Limited Liability Company under Florida Statutes §608, and other laws of the State of Florida.

**ARTICLE 1  
NAME**

The name of this limited liability company is **TurningPoint Ventures, LLC**, referred to in these Articles of Organization as the "**COMPANY**".

**ARTICLE 2  
REGISTERED OFFICE AND AGENT**

The mailing address and the street address of the principal office of the **COMPANY** is 1825 Ponce De Leon Boulevard, Suite 365, Coral Gables, Florida 33134-4418, and the street address of the **COMPANY'S** initial registered office is 1825 Ponce De Leon Boulevard, Suite 365, Coral Gables, Florida 33134-4418, and the initial Registered Agent at that address is **JOSEPH KRAUS**.

**ARTICLE 3  
DURATION**

The existence of the **COMPANY** shall be perpetual.

APPROVED  
AND  
FILED  
02 FEB 20 AM 11:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

Prepared by: Alan R. Hecht, Esq., 2670 N.E. 215 St., Miami, FL 33180, (305) 933-1441, FI Bar #186813

Law Offices of Alan R. Hecht, 2670 N. E. 215th Street/ Miami, FL 33180/ Tel. (305) 933-1441/ Fax (305) 935-2041

**ARTICLE 4  
PURPOSE AND POWERS**

Subject to the laws of the State of Florida regarding Limited Liability Companies, the **COMPANY** may engage in any and all activities and business permitted under the laws of the United States and of the State of Florida. The **COMPANY** shall have all of the powers vested in a Limited Liability **COMPANY** organized under and existing by virtue of the laws of the State of Florida.

**ARTICLE 5  
MANAGEMENT BY MANAGER(S)**

The **COMPANY** will be managed by a management committee, consisting of one (1) or more Managers. The Manager(s) will be elected annually by the Members.

**ARTICLE 6  
IDENTIFICATION OF MANAGER**

The name and street address of the initial four (4) Managers of the **COMPANY** who shall hold office for the first year of the **COMPANY'S** existence or until such person's successor is elected and has qualified is:

<u>Name</u>	<u>Address</u>
TAMARA A. VANCE	4772 N. W. 114 Avenue, Suite Miami, Florida 33138
JASON M. VANCE	4772 N. W. 114 Avenue, Suite Miami, Florida 33138
OLIVER JAHR	1521 Alton Road, Suite 432 Miami Beach, Florida 33139
JOSEPH KRAUS	1825 Ponce De Leon Boulevard, Suite 365 Coral Gables, Florida 33134-4418

APPROVED  
AND  
FILED  
02 FEB 20 AM 11:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

ARTICLE 8

RELATIONSHIP OF ARTICLES OF ORGANIZATION TO OPERATING AGREEMENT

If a provision of these Articles of Organization differs from a provision of the COMPANY'S Operating Agreement, then, to the extent allowed by law, the Operating Agreement will govern.

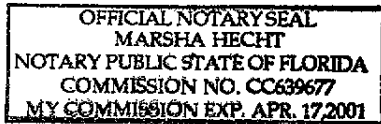
EXECUTED at Aventura, Miami-Dade County, Florida, this 15 day of February, 2002.

Handwritten signature of Joseph Kraus over the printed name JOSEPH KRAUS, an authorized person.

STATE OF FLORIDA
COUNTY OF MIAMI-DADE

The foregoing instrument was acknowledged before me this 15 day of February, 2002, by JOSEPH KRAUS, who is [X] personally known to me as the person described in and who executed the foregoing or [ ] who has produced \_\_\_\_\_ as identification, and who did [X], did not [ ], take an oath.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed my official seal at Miami, Florida, the day and year first written above.



Handwritten signature of Marsha Hecht over the printed name MARSHA HECHT. Below the name are fields for (Printed Name of Notary), Serial Number of Notary, and My Commission Expires.

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 FEB 20 AM 11:31

APPROVED
AND
FILED

## CERTIFICATE DESIGNATING REGISTERED AGENT AND REGISTERED OFFICE

In accordance with § 48.091 and §608.415, Florida Statutes, the following designation and acceptance is submitted in compliance thereof.

### DESIGNATION

TurningPoint Ventures, LLC, desiring to organize as a Limited Liability Company under the laws of the State of Florida, hereby designates **JOSEPH KRAUS** as it's Registered Agent and 2670 N.E. 215 Street, Miami, Florida 33180 as its Registered Office.

### ACCEPTANCE

Having been named as Registered Agent for the above named **COMPANY**, I hereby agree to act in such capacity for such **COMPANY** at its registered office.

  
\_\_\_\_\_  
**JOSEPH KRAUS**  
**(REGISTERED AGENT)**

02 FEB 20 AM 11:31  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

APPROVED  
AND  
FILED