

L02000005077

OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

TERESA ROMAN (TALLAHASSEE REPRESENTATIVE)

OFFICE USE ONLY

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

02 MAR - 4 PM 2:27

APPROVED
AND
FILED

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. SANTEX DEVELOPMENT, L.L.C.
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

☒ Walk in

☒ Pick up time 2:00

☒ Certified Copy

☐ Mail out

☐ Will wait

☐ Photocopy

☐ Certificate of Status

800005040768--5

-03/04/02--01069--003

***155.00 ***155.00

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/ QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

TALLAHASSEE, FLORIDA
DIVISION OF CORPORATIONS
DEPARTMENT OF STATE

02 MAR - 4 AM 11:24

RECEIVED

Examiner's Initials

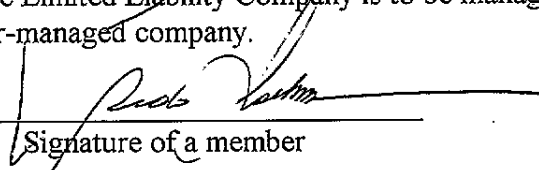
[Handwritten Signature]

ARTICLES OF ORGANIZATION
FOR
SANTEX DEVELOPMENT, L.L.C.

ARTICLE I: NAME: The name of the Limited Liability Company is **SANTEX DEVELOPMENT, L.L.C.**

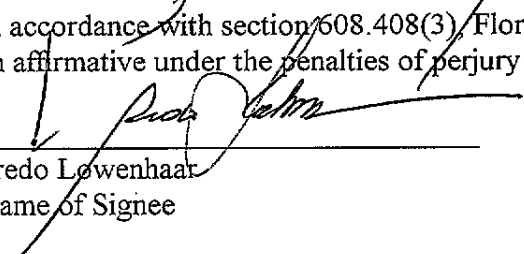
ARTICLE II: ADDRESS: The mailing address and street address of the principal office of the Limited Liability company is: 11049 NW 72 Terrace, Miami, FL 33178

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



Signature of a member

In accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmative under the penalties of perjury that the facts state herein are true.



Fredo Lowenhaar
Name of Signee

ARTICLE IV: REGISTERED AGENT, REGISTERED OFFICE AND REGISTERED AGENT'S SIGNATURE:

Fredo Lowenhaar
Name

11049 NW 72 Terrace, Miami, FL 33178
Florida Street Address

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 obligations of my position as registered agent as provided for in Chapter 606.F.S.



Registered Agents Signature


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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

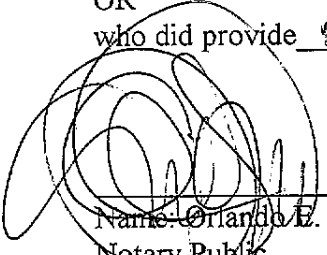
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AND
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STATE OF FLORIDA
COUNTY OF MIAMI DADE

BEFORE me did personally appear Fredo Lowenharr who is personally known to me _____
OR
who did provide Fred Lowenharr as proof of identification.

My Commission Expires

 Orlando E Reyes
My Commission CC993808
Expires March 14, 2005


Name: Orlando E. Reyes
Notary Public
State of Florida

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AND
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA