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To:

Division of Corporations

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From:

: EMPIRE CORPORATE KIT COMPANY Account Name

Account Number: 072450003255 Phone (305) 634-3694

Fax Number : (305)633-9696 AL

LIMITED LIABILITY COMPANY

GULFSIDE GABLES I, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155,00

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ARTICLES OF ORGANIZATION OF GULFSIDE GABLES I, LLC

<u> ARTICLE I - NAME</u>

The name of the Limited Liability Company is: GULFSIDE GABLES I, LLC (the "Company").

ARTICLE II- ADDRESS

The mailing address and street address of the principal office of the Company is: 7700 Re Road, South Miami, Florida 33143.

ARTICLE III- DURATION

The period of duration for the Company shall be perpetual.

ARTICLE IV- MANAGEMENT

The Company will be a manager-managed Company. The name and address of the Managers are:

Name.

Address

Jackson Ward

7700 Red Road

South Miami, Florida 33143

Stefan Johansson

7700 Red Road

South Miami, Florida 33143

<u>ARTICLE V - EFFECTIVE DATE</u>

The effective date of formation of the Company is March 25, 2002.

Articles of Organization this March 25, 2002.

IN WITNESS WHEREOF, the undersigned representative of the Members has executed these

Norman S.

Preparer: Norman S. Weider, Esq. 100 S.B. 2d Street, #3950 Miami, FL 33131

Phone; (305) 371-6338 - Florida Bar No. 150388

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CERTIFICATE OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY, ORGANIZED UNDER THE LAWS OF THE STATE OF FLORIDA, SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: GULFSIDE GABLES I, LLC.
- 2. The name and address of the registered agent and office is:

Norman S. Weider, Esq. 100 S.E. 2nd Street Suite 3950 Miami, Florida 33131

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.

NORMAN S. WEIDER, ESQ.

DATE: March 25, 2002

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