

L02000014524

Florida Department of State
Division of Corporations
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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

DADE RESIDENTIAL BISCAYNE, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATION

L02000014524

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY
COMPANY

ARTICLE I:

The name of the Limited Liability Company is:

DADE RESIDENTIAL BISCAYNE, LLC

ARTICLE II:

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

**782 N.W. 42nd Avenue, Suite 630
Miami, Florida 33126**

ARTICLE III

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

**ANTONIO GONZALEZ
782 N.W. 42nd Avenue, Suite 630
Miami, Florida 33126**

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 proper 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.


REGISTERED AGENT'S SIGNATURE

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ARTICLE IV:

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

Orlando, FL

Signature of a member or an authorized representative of a member

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

ANTONIO GONZALEZ

Typed or printed name of signee

STATE OF FLORIDA)
COUNTY OF MIAMI-DADE)

I Hereby Certify that on this day, before me, an officer duly authorized to administer oaths and take acknowledgments, personally appeared ANTONIO GONZALEZ known to be the person described in and who executed the foregoing instrument, who acknowledged before me that he executed the same, and an oath was not taken. Said person provided the following type of identification: Fl. Driver's License.

Witness my hand and official seal in the County and State last aforesaid this 7th day of
 June, A.D., 2002.

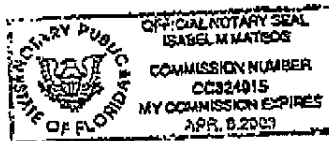
Notary Rubber Stamp Seal:

NOTARY SIGNATURE

Printed Notary Signature

Prepared By:

MICHAEL S. CEASE, ESQ.
2900 N.W. 7th Street
Miami, Florida 33125
(305) 642-5231



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