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To: Division of Corporations
Fax Number : (850) 205-0383

From: Account Name : BILZIN, SUMBERG DUNN BAENA PRICE & AXELROD LLP.
Account Number : 075350000132
Phone : (305) 374-7580
Fax Number : (305) 350-2446

LIMITED LIABILITY COMPANY

DMARC 1998-C1 BROWARD COLONY, LLC

Certificate of Status	1
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Estimated Charge	\$160.00

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Fax Audit No.: H02-155837

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DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDAARTICLES OF ORGANIZATION
OF
DMARC 1998-C1 BROWARD COLONY, LLC

1. The name of the limited liability company is DMARC 1998-C1 Broward Colony, LLC.
2. The mailing address and the street address of the principal office of the limited liability company are c/o Lennar Partners, Inc., 760 N.W. 107th Avenue, Suite 400, Miami, Florida 33172.
3. The name and street address of the initial registered agent of the limited liability company are C T Corporation System, 1200 South Pine Island Road, Plantation, Florida 33324.
4. The limited liability company shall be managed by a manager. The name and address of the initial manager of the limited liability company are: Lennar Partners, Inc., a Florida corporation, 760 N.W. 107th Avenue, Suite 400, Miami, Florida 33172. # P93000046533

IN WITNESS WHEREOF, these Articles of Organization have been executed by the below named authorized representative of the member of the limited liability company effective as of the 21st day of June, 2002.

/s// Kendall Sparkman
Kendall Sparkman
Authorized Representative

Fax Audit No.: H02-155837

**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 SUBMITS THE FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the Limited Liability Company is:

DMARC 3998-CI Broward Colony, LLC

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

C T Corporation System

(Name)

c/o C T Corporation System, 1200 South Pine Island Road

Florida street address (P.O. Box NOT ACCEPTABLE)

Plantation

FL 33324

City/State/Zip

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..

C T Corporation System

PETER F. SOUZA
ASSISTANT SECRETARY

(Signature)

\$ 100.00 Filing Fee for Application
\$ 25.00 Designation of Registered Agent
\$ 30.00 Certified Copy (optional)
\$ 5.00 Certificate of Status (optional)

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