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Florida Department of State  
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To: FLORIDA DEPARTMENT OF STATE  
Division of Corporations  
Fax Number : (850)205-0383

From: DIANA M. GUERRA, LEGAL ASSISTANT, EXT. 4546  
Account Name : AKERMAN, SENTERFITT & BIDSON, P.A.  
Account Number : 075471001363  
Phone : (305)374-5600  
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DIVISION OF CORPORATION

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**LIMITED LIABILITY COMPANY**

**MIAMIBAY, LLC**

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**ARTICLES OF ORGANIZATION FOR MIAMBAY, LLC**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: **MIAMBAY, LLC.**

**ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability Company is: c/o Adriana Koeck De Schmidt, One S.E. 3<sup>rd</sup> Avenue, 28<sup>th</sup> Floor, Miami, Florida 33131.

**ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:**


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

Aliet Casas  
10651 S.W. 68<sup>th</sup> Lane, Apt. 1-G  
Miami, FL 33176

*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.*

By   
Aliet Casas  
Registered Agent's Signature

Signed and dated this 8<sup>th</sup> day of July, 2002.

  
Aliet Casas  
Signature of a member

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