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LIMITED LIABILITY COMPANY

PONCE LEJEUNE, LLC

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\$130.00



Transmittal Cover Sheet

TO

Division of Corporations

Company

Florida Department of State

Fax Number

850/205-0383

Phone Number

850-245-6052

FROM

Nancy J. Calhoun for Joel D. Maser, Esq.

File Number

10155.013600

Comments

See attached.

02 SEP 11 PM 3: 10

Date

September 11, 2002

Time

2:10 PM

No. Pages

Including this cover sheet 4

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450 South Orange Avenue, Suite 650, Orlando, Florida 32801 (407) 420-1000 Fax (407) 420-5909

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STATE OF FLORIDA ARTICLES OF ORGANIZATION OF PONCE LEJEUNE, LLC

These Articles of Organization of PONCE LEJEUNE, LLC, a Florida limited liability company (the "Company"), dated as of the 6th day of September, 2002, are being duly executed and filed by Sherwood M. Weiser, as its authorized representative, who is authorized to form a limited liability company under the Florida Limited Liability Company Act (Chapter 608 of Florida Statutes).

ARTICLE I - Name:

The name of the limited liability Company is:

PONCE LEJEUNE, LLC.

ARTICLE II - Address: The principal address and mailing address of the Company is: 3250 Mary Street, 5th Floor, Miami, Florida 33133.

ARTICLE III - Registered Agent, Registered Office and Registered Agent's Signature:

The Registered Agent and Registered Office for service of process is as follows:

Name:

Sherwood M. Weiser

Address:

3250 Mary Street, 5th Floor

Miami, Florida 33133

ARTICLE IV - Manager-Managed:

The limited liability Company shall be a manager-managed Company.

Having been named to accept service of process for the Company named above, at the place designated in this certificate, I agree to act in that capacity and to comply with the provisions of the Florida Limited Liability Company Act and all other applicable laws, relative to the proper and complete performance of my duties as registered agent.

Sherwood M. Weiser Registered Agent

IN WITNESS WHEREOF, the undersigned has executed these Articles of Organization as of the date first above written.

Sherwood M. Weiser, Authorized Representative