

02000023627

Florida Department of State  
Division of Corporations  
Public Access System

Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.**

(((H02000195543 2)))

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

To:

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

From:

Account Name : AKERMAN, SENTERFITT & BIDSON, P.A.  
Account Number : 075471001363  
Phone : (305) 374-5600  
Fax Number : (305) 374-5095

*Angie Calabrese*

DIVISION OF CORPORATION

02 SEP 12 AM 8:12

RECEIVED

**LIMITED LIABILITY COMPANY**

**GULA SUNNY ISLE S, LLC**

Certificate of Status	0
Certified Copy	1
Page Count	01
Estimated Charge	\$155.00

FILED/RECEIVED/UNITA

02 SEP 11 AM 9:05

SEP 11 2011

*9/12/11*  
*[Signature]*

FAX AUDIT No. H02000195543

**ARTICLES OF ORGANIZATION  
FOR  
GULA SUNNY ISLES, LLC**

**ARTICLE I - Name:**

The name of the Limited Liability Company is: GULA SUNNY ISLES, LLC.

**ARTICLE II - Address:**

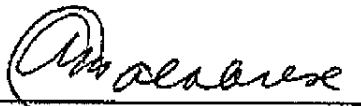
The mailing address and street address of the principal office of the Limited Liability Company is: 5810 Miami Lakes Dr., Miami Lakes, FL 33014.

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

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

American Information Services, Inc.  
One S.E. 3rd Avenue  
28th Floor  
Miami, FL 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 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   
Angelica M. Calabrese, Assistant Secretary  
Registered Agent's Signature

Signed and dated this 11th day of September, 2002.

  
Lisa A. Landy  
Authorized Representative of a Member

FAX AUDIT No. H02000195543