LO2000035875 MROCT PHILED PHILED

ACCOUNT NO. : 072100000032

AUTHORIZATION:

\$ 160.00 COST LIMIT :

ORDER DATE: October 2, 2002

ORDER TIME : 10:18 AM

ORDER NO. : 767568-005

CUSTOMER NO: 82293A

CUSTOMER: Ms. Marlene Prego

Martinez-esteve & Lopez-castro

Suite 304

901 Ponce De Leon Boulevard

Coral Gables, FL 33134

DOMESTIC FILING

TUSCANY PROPERTIES, LLC NAME:

EFFECTIVE DATE:

800008156078=-3

XX ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

CERTIFIED COPY

CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Norma Hull - EXT. 1115

EXAMINER'S INITIALS:

## ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

## **ARTICLE I - Name:**

The name of the Limited Liability Company is:

TUSCANY PROPERTIES, LLC

## **ARTICLE II - Address:**

The mailing address and street address of the principal office of the Limited Liability

7360 S.W. 24th Street, #34 Miami, FL 33155

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

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

Name
901 Ponce de Leon Blvd., #304

Florida street address (P.O. Box NOT acceptable)
Coral Gables, FL 33134

City, State, and 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 it Chapter 608, F.S.

Registered Agent's Signature

Article IV - Management (Check box if applicable.)

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

(An additional article must be added if an effective date is requested)

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.)

CONSTANTINO ARGIMON

Typed or printed name of signee

## Filing Fees:

\$100.00 Filing Fee for Articles of Organization

- \$ 25.00 Designation of Registered Agent
- \$ 30.00 Certified Copy (Optional)
- \$ 5.00 Certificate of Status (Optional)