

LO2000028710

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

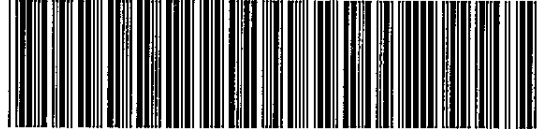
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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236 East 6th Avenue . Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666 . Fax (850) 222-1666

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CERTIFIED COPY _____ CUS _____

PHOTO COPY _____ FILING LLC

1.) 700 Biscayne Blvd., LLC
(CORPORATE NAME & DOCUMENT #)

2.) _____
(CORPORATE NAME & DOCUMENT #)

3.) _____
(CORPORATE NAME & DOCUMENT #)

4.) _____
(CORPORATE NAME & DOCUMENT #)

5.) _____
(CORPORATE NAME & DOCUMENT #)

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SPECIAL INSTRUCTIONS _____

**ARTICLES OF ORGANIZATION FOR
700 BISCAYNE BLVD., L.L.C.
A FLORIDA LIMITED LIABILITY COMPANY**

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ARTICLE I - Name:

The name of the Limited Liability Company is:

700 BISCAYNE BLVD., L.L.C.

ARTICLE II - Address:

The mailing address and principal office address of the Limited Liability Company is:

c/o Alan E. Krinzman, Esq.
Adorno & Yoss, P.A.
2601 S. Bayshore Drive, Suite 1600
Miami, Florida 33133

ARTICLE III - Management:

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

DATED this 28th day of October, 2002.

By: _____

Alan E. Krinzman
Authorized Representative

**CERTIFICATE OF DESIGNATION OF
REGISTERED AGENT/REGISTERED OFFICE**

**PURSUANT TO THE PROVISIONS OF SECTIONS 608.415 OR 608.507, FLORIDA
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE
FOLLOWING STATEMENT IN DESIGNING THE REGISTERED
OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA**

1. The name of the Limited Liability Company is:

700 BISCAYNE BLVD., L.L.C.

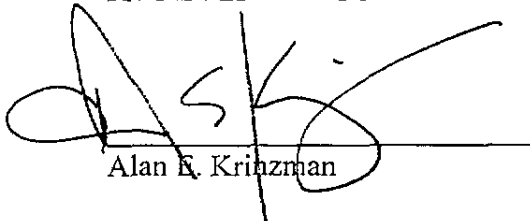
2. The name and address of the registered agent and office is:

Alan E. Krinzman
Adorno & Yoss, P.A.
2601 S. Bayshore Drive, Suite 1600
Miami, Florida 33133

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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 appointments as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statues 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.

REGISTERED AGENT:


Alan E. Krinzman

Dated: October 28, 2002

STATE OF FLORIDA)
) SS:
COUNTY OF MIAMI-DADE)

THE FOREGOING INSTRUMENT was acknowledged before me this 28th day of October, 2002 by Alan E. Krinzman, as Registered Agent of 700 BISCAYNE BLVD., L.L.C., a Florida limited liability company, who is personally known to me or who has produced _____ as identification and who did/did not take an oath.

Marjorie L. Owen-Baillie
Notary Public, State of Florida
Print Name: MARJORIE L. OWEN-BAILLIE
My Commission Expires: _____



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