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Man Co par 1.35 OFFICE USE ONLY (Document #) EXPRESS CORPORATE FILING SERVICE INC. (Requestor's Name) 1000 PONCE DE LEON BLVD. STE: 101 (Address) CORAL GABLES, FL 33134 305-444-4994 (City, State, Zip) OFFICE USE ONLY CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known): (Document #) (Document #) (Corporation Name) (Document #) (Document #) (Corporation Name) Walk in Certified Copy Pick up time effective and Photocopy Certificate of Status Mail out **AMENDMENTS NEW FILINGS** Amendment Profit Resignation of R.A., Officer/Director NonProfit Change of Registered Agent Limited Liability Dissolution/Withdrawal Domestication Merger Other REGISTRATION/ OTHER FILINGS QUALIFICATION Annual Report Foreign Fictitious Name Limited Partnership Name Reservation Reinstatement Trademark

Other

Examiner's Initials

CR2E031(9/92)

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is: BANYAN HOMES, LLC

ARTICLE II - Address:

The mailing address and street address of the principal office of the Limited Liability Company 8065 LOS PINOS CIRCLE

CORAL GABLES, FLORIDA 33143

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

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

SUSANA SKRANDE

8065 LOS PINOS CIRCLE

Florida street address(PO Box NOT acceptable) CORAL GABLES, FLORIDA 33143

City, State, and Zip

Man College Par 1.35 Having been named as registered agent and to accept service of process for the above stated limited liability company at the place designed 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.

Registered Agent's Signature

ARTICLE IV - Management (Check box if applicable)

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

MANAGER MEMBER: SUSANA SKRANDE, 8065 LOS PINOS CIRCLE

CORAL GABLES, FLORIDA

MANAGER MEMBER: ADOLFO SKRANDE, 8065 LOS PINOS CIRCLE

CORAL GABLES, FLORIDA

The effective date of this company is: NOVEMBER 20, 2002

Signature of a member of an authorized representative of a member

(In accordance with section 608.403(3), Florida Statutes, the execution of this document constitutes an affirmation under the penalties of perjury that the facts stated herein are true)

> SUSANA SKRANDE Typed or printed name of signee