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

From: Account Name : EMPIRE CORPORATE KIT COMPANY
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DIVISION OF CORPORATIONS

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RECEIVED

LIMITED LIABILITY COMPANY

INTREPID VAIL PARTNERS, LLC

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

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ARTICLES OF ORGANIZATION

FOR

INTREPID VAIL PARTNERS, LLC

ARTICLE I - NAME:

The name of this Limited Liability Company ("Company") shall be:

INTREPID VAIL PARTNERS, LLC

ARTICLE II - ADDRESS

The mailing address and street address of the Company is: 3896 Biscayne Boulevard
Miami, Florida 33137

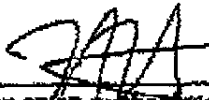
ARTICLE III - DURATION

The period of duration for the Company shall be perpetual unless dissolved according to
law.

ARTICLE IV - MANAGEMENT

The Company is to be managed by manger(s) of the Company. The initial managers of
the Company are:

The Intrepid Real Estate Company, LLC
3896 Biscayne Boulevard
Miami, Florida 33137



Signature of a member or an authorized representative of a member
(In accordance with section 608.408(3), Florida Statutes, the execution of this
affidavit constitutes an affirmation under the penalties of perjury that the facts
stated herein are true.)

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TREASURY OF FLORIDA

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

PURSUANT TO THE PROVISIONS OF SECTION 608.415 OR 608.507, FLORIDA
STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE
FOLLOWING STATEMENT TO DESIGNATE A REGISTERED OFFICE AND
REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is: INTREPID VAIL PARTNERS, LLC
2. The name and the Florida street address of the registered agent are:

PEDRO A. MARTIN, BSO.

NAME

Greenberg Traurig, P.A.

1221 Brickell Avenue, Suite 2100

Florida street address (P.O. BOX NOT ACCEPTABLE)

Miami, Florida 33131

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.


SIGNATURE

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