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Division of Corporations

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From:

Account Name : EMPIRE CORPORATE KIT COMPANY

Account Number : 072450003255 Phone : (305)634-3694 Fax Number : (305)633-9696

LIMITED LIABILITY COMPANY

CORAL LAKE PLAZA LLC

AL

Certificate of Status	Q
Certified Copy	1
Page Count	02
Estimated Charge	\$155.00

1 of 2

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FLORIDA DEPARTMENT OF STATE

Ken Deizner
Secretary of State

January 15, 2003

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SUBJECT: CORAL LAKE PLAZA LLC

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Section 607.0120(4), 617.01201, or 608.4081, Florida Statutes, requires all corporate documents to be typewritten or printed.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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Division of Corporations - P.O. BOX 6327 Tallahassee, Florida 32314

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ARTICLES OF ORGANIZATION

ARTICLE I - Name:

The name of the Limited Liability Company is:

Coral Lake Plaza LLC

ARTICLE II - Address:

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

13205 SW 137th Avenue, Suite# 101

Miami, Fl. 33186 ARTICLE III - Registered Agent, Registered Office, & Registered Agent's Signature:

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

Robert Sherry 13205 S.W. 137th Avenue, Suite# 101 Florida street address (P.O. Box NOT acceptable) Miami 33186 City, States, 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 performante of my duttes, and I am familiar with and accept the obligations of my position he negleteled ageletias provided for in Chapter 608, F.S.

Registered Agent's Signature

Arricle 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 affective date is requested)

Sincature of a momber or an enthorized representative of a member.

(In accordance with section 608,402(3), Florida Statutes, the execution of this document constitutes an affirmation under the prosition of perjuly that the facts stated heroin are true.)

Daniel Stuzin Esc Typed or printed name of signer

Filipe Fee:

\$100.00 Filing Fee for Articles of Organization 5 25.00 Designation of Registered Agent 2 30.00 Certified Copy (Optional)

8 5.00 Certificate of Status (Optional)

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