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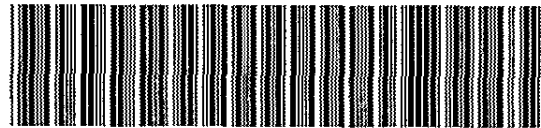
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JAMES A. MOLANS
ATTORNEY AT LAW
5901 S.W. 74TH STREET, SUITE 400
SOUTH MIAMI, FLORIDA 33143

(305) 666-0345
FAX (305) 284-9387
VOICE MAIL (305) 957-9600

April 3, 2003

Florida Department of State
Registration Section
Division of Corporations
409 East Gaines Street
Tallahassee, Florida 32399

RE: **SAN GABRIEL SHOPPING CENTER, LLC**

Dear Secretary of State:

Enclosed please find the Articles of Organization for the above referenced company to be formed. Also enclosed is my check in the amount of \$160.00.

Please form **SAN GABRIEL SHOPPING CENTER, LLC**, as Florida Limited Liability Company. After its formation, please return a Certified Copy of the Articles of Organization and the Certificate of Status to me at the above referenced address.

If you have any questions or comments, please contact my office at the above referenced address and telephone number. Your continued cooperation with my office is appreciated.

Very truly yours,


James A. Molans

JAM: alm

Enclosure

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TALLAHASSEE, FLORIDA

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:

SAN GABRIEL SHOPPING CENTER, LLC

ARTICLE II - Address:

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

5901 S.W. 74th Street #400, South Miami, FL 33143

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

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

JAMES A. MOLANS
Name

5901 S.W. 74th Street #400
Florida street address (P.O. Box **NOT** acceptable)

South Miami, FL 33143 FL
City, State, and Zip

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TALLAHASSEE, FLORIDA

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 in Chapter 608, F.S.

James A. Molans
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)

Marisol Rodriguez
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.)

MARISOL RODRIGUEZ
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)