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Division of Corporations

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Prom:

: FAS-T CORP. AGENTS, INC. Account Name

Account Number: 071001002335 Phone : (305)599-0839

: (305)716-0346 Fax Number

LIMITED LIABILITY COMPANY

SALIBA INVESTMENTS I, LLC.

Certificate of Status	0
Certified Copy	1
Page Count	02
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IVISION OF CUMPORATION



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## FLORIDA DEPARTMENT OF STATE Clenda E. Hood Secretary of State

May 1, 2003

FAS-T CORP. AGENTS, INC.

SUBJECT: SALIBA INVESTMENTS I, LLC

REF: W03000012529

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Pursuant to section 608.409(2), F.S., the effective date must be specific, cannot be more than five business days prior to the date of filing or more than 90 days after the date of filing. Our office received your document on May 1, 2003. Please amend your document accordingly.

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

If you have any questions concerning the filing of your document, please call (850) 245-6025.

Trevor Brumbley Document Specialist Amount charged: 155.00 FAX Aud. #: H03000179863 Letter Number: 003A00026693

## ARTICLES OF ORGANIZATION

## SALIBA INVESTMENTS I, LLC

## A LIMITED LIABILITY COMPANY

(Pursuant to Chapter 608, Florida Stanutes)

- 1. Name. The name of the limited liability company is SALIBA INVESTMENTS LLLC.
- 2. <u>Purpose.</u> The purpose of this limited liability company may include the transaction of any and all lawful business for which limited liability companies may be organized in the state of Florida.
- 3. Address of Principal Office. The street address of the principal office of the limited liability company is:

4501 S.W. 146TH CT., MIAMIL FL 33175

4. Mailing Address. The mailing address of the limited liability company is:

4501 S.W. 146TH CT., MIAMI, FL 33175

- 5. Management. The limited liability company is to be managed by one or more members and is, therefore, a member-managed company.
- 6. Registered Agent. Registered Office, and Registered Agents Signature. The name and the Florida street address of the registered agent is:

Joseph Shomar 5190 n.W. 167th Street, #113 Miami, FL 33014

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 provisional 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.

JOSEPH SHOMAR

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7. Effective Date. The effective date of the limited liability company shall be the date of filing unless otherwise stated below:

APRIL 29, 2003

GEORGES SALIBA

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 and correct.)

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