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Division of Corporations

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France -

Account Name : RUDEN, MCCLOSKY, SMITH, SCHUSTER & RUSSELL, P.A.

Account Number: 076077000521 Phone: (954)527-2428 Fax Number: (954)764-4996

LIMITED LIABILITY COMPANY

24th and Collins, LLC

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HVISION OF COMPORATION

ARTICLES OF ORGANIZATION OF 24^{TII} AND COLLINS, LLC a Florida limited liability company

The undersigned, pursuant to the provisions of Chapter 608 of the Florida Statutes, for the purpose of forming a limited liability company under the laws of the State of Florida do set forth the following:

- 1. <u>NAME.</u> The name of the limited liability company is 24th and Collins, LLC (the "Company").
- MAILING AND STREET ADDRESS OF PRINCIPAL OFFICE, The mailing and street address of the principal office of the Company is: 11220 SW 82nd Place, Miami, Florida 33156.
- 3. <u>REGISTERED AGENT</u>. The name and address of the initial registered agent in the State of Florida, whose Consent to Appointment as Registered Agent accompanies these Articles of Organization are: Tomas Villanueva, 11220 SW 82nd Place, Miami, Florida 33156.

The undersigned has executed these Articles of Organization on the _______ day of March, 2003.

By: Tomas Villanueva, Authorized Representative

FTL:1019106:1

CERTIFICATION OF DESIGNATION OF REGISTERED AGENT/REGISTERED OFFICE

PURSUANT TO THE PROVISIONS OF SECTION 608.415, FLORIDA STATUTES, THE UNDERSIGNED LIMITED LIABILITY COMPANY SUBMITS THE FOLLOWING STATEMENT IN DESIGNATING THE REGISTERED OFFICE/REGISTERED AGENT, IN THE STATE OF FLORIDA.

- 1. The name of the limited liability company is: 24th and Collins, LLC.
- The name and address of the registered agent and office are:

Tomas Villanueva 11220 SW 82nd Place Miami, Florida 33156

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 its 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.

Tomas Villanueva

Date:

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