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03 JUN 18 AM 8:44
STATE OF FLORIDA
TALLAHASSEE, FLORIDA

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DIVISION OF CORPORATIONS

BY



CORPORATION SERVICE COMPANY™

ACCOUNT NO. : 072100000032

REFERENCE : 137207 4304756

AUTHORIZATION : *Patricia Pignatelli*

COST LIMIT : \$ 125.00

03 JUN 18 AM 8:14
FILED
SERIALS SECTION
TALLAHASSEE, FLORIDA

ORDER DATE : June 18, 2003

ORDER TIME : 2:27 PM

ORDER NO. : 137207-005

CUSTOMER NO: 4304756

CUSTOMER: Mr. Robert Porcelli
Bingham Mccutchen Llp

150 Federal Street

Boston, MA 02110

DOMESTIC FILING

NAME: MIAMI RIVERFRONT PARTNERS LLC

EFFECTIVE DATE:

- ARTICLES OF INCORPORATION
- CERTIFICATE OF LIMITED PARTNERSHIP
- ARTICLES OF ORGANIZATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

- CERTIFIED COPY
- PLAIN STAMPED COPY
- CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Darlene Ward - EXT. 1135

EXAMINER'S INITIALS: _____

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

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ARTICLE I - Name:

The name of the Limited Liability Company is:

Miami Riverfront Partners LLC

ARTICLE II - Address:

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

515 North Flagler Drive, 5th Floor, West Palm Beach, FL 33401

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

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

Corporation Service Company
Name
1201 Hays Street
Florida street address (P.O. Box NOT acceptable)
Tallahassee FL 32301
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 as provided for in Chapter 608, F.S.

Corporation Service Company
By: *M. Pierce Cella*
Registered Agent's Signature

(An additional article must be added if an effective date is requested)

Joanne D.C. Foley
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.)

Joanne D.C. Foley, Authorized Representative
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)