

LU30000374 11

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

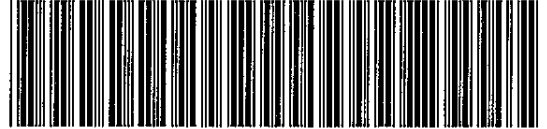
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



700022788217

09/29/03 --01003--002 **155.00

BR

FILED
RECEIVED
03 SEP 30 11:11:24
03 SEP 29 AM 11:23
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

W03-27878
J. BRYAN SEP 29 2003

OFFICE USE ONLY(DOCUMENT #)

LAZARUS CORPORATE FILING SERVICE

3320 S.W. 87 AVENUE

MIAMI, FLORIDA (305)552-5973

OFFICE USE ONLY

FILED
03 SEP 30 AM 11:21
TALLAHASSEE, FLORIDA

CORPORATION NAME(S) & DOCUMENT NUMBER(S) (if known):

1. SUNSHINE BELT MANAGEMENT, LLC
(Corporation Name) (Document #)

2. _____
(Corporation Name) (Document #)

3. _____
(Corporation Name) (Document #)

4. _____
(Corporation Name) (Document #)

Walk in Pick up time 2:00 Certified Copy
 Mail out Will wait Photocopy Certificate of Status

NEW FILINGS	
<input type="checkbox"/>	Profit
<input type="checkbox"/>	NonProfit
<input checked="" type="checkbox"/>	Limited Liability
<input type="checkbox"/>	Domestication
<input type="checkbox"/>	Other

AMENDMENTS	
<input type="checkbox"/>	Amendment
<input type="checkbox"/>	Resignation of R.A., Officer/Director
<input type="checkbox"/>	Change of Registered Agent
<input type="checkbox"/>	Dissolution/Withdrawal
<input type="checkbox"/>	Merger

OTHER FILINGS	
<input type="checkbox"/>	Annual Report
<input type="checkbox"/>	Fictitious Name
<input type="checkbox"/>	Name Reservation

REGISTRATION/QUALIFICATION	
<input type="checkbox"/>	Foreign
<input type="checkbox"/>	Limited Partnership
<input type="checkbox"/>	Reinstatement
<input type="checkbox"/>	Trademark
<input type="checkbox"/>	Other

Examiner's Initials



FLORIDA DEPARTMENT OF STATE
Glenda E. Hood
Secretary of State

September 29, 2003

LAZARUS CORPORATE FILING SERVICE

SUBJECT: SUNSHINE BELT MANAGEMENT, LLC
Ref. Number: W03000027878

FILED
03 SEP 30 AM 11:21 RECEIVED
TALLAHASSEE, FLORIDA
DEPT. OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
SEP 30 AM 10:46

We have received your document for SUNSHINE BELT MANAGEMENT, LLC and your check(s) totaling \$155.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please list the complete principal's office address. This address must be a street address; a post office box is not acceptable.

The document must contain the entity's complete mailing address.

The document must contain written acceptance by the registered agent, (i.e. "I hereby am familiar with and accept the duties and responsibilities as Registered Agent.")

The registered agent must sign accepting the designation.

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) 245-6043.

Joey Bryan
Document Specialist

Letter Number: 703A00053561

**ARTICLES OF ORGANIZATION
OF
Sunshine Belt Management, LLC**

FILED
03 SEP 30 AM 11:21
TALLAHASSEE, FLORIDA

I, the undersigned, do hereby adopt the following Articles of Organization for the purpose of forming a State of Florida Limited Liability Company.

ARTICLE I – NAME

The name of the Limited Liability Company is to be Sunshine Belt Management, LLC.
*The mailing address & Principal office is: 825 Brickell Bay Drive
Suite 246
Miami, Florida 33131*

ARTICLE II – DURATION

The period of duration for this limited liability company is perpetual from the date filing the Articles of Organization, unless dissolved by the member(s) or as provided by State law.

ARTICLE III -- BUSINESS PURPOSE

The Company is organized to perform any and all lawful acts pertaining to the management of any lawful business for which a Limited Liability Company may be organized under the State of Florida Limited Liability Company Act and any amendments thereto and specifically the purpose of the company is to be the management company for condominium buildings.

ARTICLE IV – REGISTERED AGENT

The Company shall continuously maintain an agent in the State of Florida for the service of process who is an individual residing in said State. The name and address of the initial registered agent is Mr. Robert Alwine, at 825 Brickell Bay Drive, Suite 246, Miami, Florida 33131.

ARTICLE V – ORIGINAL MEMBERS

The original members of the Company are:

Mr. Robert Alwine
825 Brickell Bay Drive, Suite 246
Miami, Florida 33131

Mrs. Susan Alwine
825 Brickell Bay Drive, Suite 246
Miami, Florida 33131

ARTICLE VI – NEW MEMBERS

After the formation of the Company, any person acceptable to the majority in interest of the Member(s) may become a Member of the Company

ARTICLE VII – CONTINUATION FOLLOWING DISSOLUTION

The remaining Member(s) of the Company, by unanimous vote if there is more than one Member, may exercise the right to continue the business upon the death, retirement, resignation, or the occurrence of any other event which terminates the continued membership of a Member of this limited liability company.

FILED
03 SEP 30 AM 11:21
TAMPA, FLORIDA

ARTICLE VIII – MANAGEMENT

The business of the Company shall initially be conducted under the exclusive management of its member(s) who shall have authority to act for the Company in all matters. The name(s) and address(es) of the member(s):

Manager

Mr. Robert Alwine
825 Brickell Bay Drive, Suite 246
Miami, Florida 33131

Manager

Mrs. Susan Alwine
825 Brickell Bay Drive, Suite 246
Miami, Florida 33131

ARTICLE IX – ORGANIZER

The name and address of the organizer who shall constitute the initial organizer of the Company is as follows:

Mr. Robert Alwine
825 Brickell Bay Drive, Suite 246
Miami, Florida 33131

ARTICLE X – TAXATION

For purposes of taxation, the Company shall initially operate as a sole proprietorship.

ARTICLE XI – EFFECTIVE DATE


The effective date of this document shall be the date it is filed by the Secretary of State for the State of Florida.

ARTICLE XII – SIGNATURE

In affirmation thereof, the facts stated above are true:

Having been name as registered agent and to accept the service.

By


Robert Alwine / Registered Agent
Organizer

Date:

9-25-03

03 SEP 30 AM 11:21
STATE OF FLORIDA

FILED