

**L03000038013**

Florida Department of State

Division of Corporations

Public Access System

## Electronic Filing Cover Sheet

**Note: Please print this page and use it as a cover sheet.** Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H03000291022 3)))

**Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.**

## To:

Division of Corporations  
Fax Number : (850) 205-0383

## From:

Account Name : EMPIRE CORPORATE KIT COMPANY  
Account Number : 072450003255  
Phone : (305) 634-3694  
Fax Number : (305) 633-9696

RECEIVED  
03 OCT -6 PM 1:39  
DIVISION OF CORPORATIONS

**LIMITED LIABILITY COMPANY**

commodore investments IV, llc

Certificate of Status	0
Certified Copy	1
Page Count	03
Estimated Charge	\$155.00

03 OCT -6 PM 1:45  
STATE OF FLORIDA  
ALLAHASSEE, FLORIDA

FILED  
AND  
RECEIVED

Electronic Filing Menu

Corporate Filing

Public Access Help

DB  
10-6-03

H03000291022

(4)

**Articles of Organization of**  
**Commodore Investments IV, LLC**

The undersigned, desiring to form a limited liability company for the purposes set forth herein and in conformance with the Florida Limited Company Act, does hereby establish the following:

1. **Name.** The name of the limited liability company is: **Commodore Investments IV, LLC**
2. **Duration.** The period of duration of the limited liability company is perpetual unless sooner dissolved as provided by statute.
3. **Purpose.** This limited liability company is organized for the purpose of engaging in any lawful business in which limited liability company may engage under Florida law.
4. **Principal Place of Business and Mailing Address.** The address of its principal place of business, as well as the mailing address for this limited liability company is:

*2520 SW 28 Lane  
Miami, Florida 33133-3133*

5. **Registered Agent and Office.** The name and address of its initial registered agent in the State of Florida, whose Consent to appointment as Registered Agent accompanies these Articles, is:

**SAMUEL SPENCER BLUM, ESQUIRE**  
*2666 Tigertail Avenue  
Suite 106  
Coconut Grove, Florida 33133*

6. **Initial Member.** The name of the initial member of the limited liability company and address is as follows:

*Dennis J. Leaton  
2520 SW 28 Lane  
Miami, Florida 33133-3133*

7. **Admission of Additional Members.** Additional Members will be admitted only pursuant to the operating agreement, which may be entered into by the Members of the Company, or upon such other terms as are


Samuel Spencer Blum H03000291022

APPROVED  
AND  
FILED  
03 OCT -6 PM 1:45  
CLERK OF DISTRICT COURT  
JACKSONVILLE, FLORIDA

unanimously agreed to by all Members entitled to a dividend upon dissolution or liquidation.

8. Continuity. The remaining Members of the limited liability company will have the right to continue the business upon the death, retirement, resignation, expulsion, bankruptcy or dissolution of a Member or occurrence of any other event which terminated the continued Membership of a Member in this limited liability company. The return of capital and the distribution of profits shall be determined from the limited liability company's books, as of the effective date of withdrawal, based on the provisions of the regulations, and paid as soon as practicable without diminishing the prospects of the limited liability company's ventures and subject to the limitations of Florida law.
9. Management. The business of the company shall be reserved to and conducted under the exclusive management of its Managing Member. This is a manager-managed company.

Dated this 10 day of SEPT, 2003

  
Dennis J. Leaton

SSB/bps

Z:\WORK\Corporations\Commodore Inv IV LLC\ARTICLES OF ORGANIZATION OF.doc

APPROVED  
AND  
FILED

03 OCT -6 PM 1:45

CLERK OF CIRCUIT COURT  
ALLAHACSEE, FLORIDA

Samuel Spencer Blum

H03000291022

**CERTIFICATE 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 TO DESIGNATE A REGISTERED OFFICE AND REGISTERED AGENT IN THE STATE OF FLORIDA.

1. The name of the limited liability company is:

*Commodore Investments IV, LLC*

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

**SAMUEL SPENCER BLUM, ESQUIRE**  
*2666 Tigertail Avenue*  
*Suite 106*  
*Coconut Grove, Florida 33133*

*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.*

  
 \_\_\_\_\_  
**SAMUEL SPENCER BLUM, Registered Agent**

SSB/bps

Z:\WORK\Corporations\Commodore Inv IV LLC\CERTIFICATE OF DESIGNATION OF.doc

RECEIVED  
 SECRETARY OF STATE  
 FLORIDA  
 03 OCT -6 PM 1:45

APPROVED  
 FILED

Samuel Spencer Blum

H03000291022